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Contributors

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COUNTY BOROUGH OF EASTBOURNE

ANNUAL REPORT

OF THE

Medical Officer of Health

Principal School Medical Officer
FOR

1958

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



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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

Health and Welfare Services Department,
Avenue House,
Eastbourne.

Yuly, 1959.

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 the sixty-seventh in the series of Annual Reports of the Health and Welfare Services of the Borough. This Report also marks ten years of working of the National Health Service in which connection the Minister of Health requests a brief review of the manner in which during that period the local health services have functioned in the wider setting of the National Health Service generally. This review appears on page 15.

Statistical

An outstanding achievement is the Infant Mortality Rate of 9.9 compared with the rate for England and Wales of 22.5. This is to the best of my knowledge the first time that any Local Health Authority has recorded a rate under 10. The previous lowest record of 13.07 was also held by Eastbourne.

The total number of annual births is admittedly relatively small and Eastbourne is fortunate in having social conditions well above average. Nevertheless, this figure reflects credit on the obstetric skill of the local doctors and midwives and, coupled with a maternal mortality rate of nil for the third year running, is a great source of encouragement to members of the staff of this department who have devoted so much energy and enthusiasm to health education and ante-natal care.

It is worthy of note that Aberdeen is also recording a dramatic fall in infant mortality. It may well be that the common factor between these very different and widely separate local health authorities is an exceptional development of health education and ante-natal care.

Mental Health Service

The year has seen progressively increasing services and extensions of existing services falling to be undertaken by the department and it closes with the certainty of more to come, particularly in the field of mental welfare. In the light of the local authority's fine record of development in the field of health, welfare, and education, there can be no reason to doubt its ability to undertake the substantial tasks ahead. The services envisaged will undoubtedly be costly and will in turn relieve the hospital authorities and thereby the exchequer of considerable expense.

Care of the Aged and Chronic Sick

Hardship and distress caused by a serious local deficiency of hospital beds for the chronic sick reached its peak during the year and continued to exercise severe pressure on the Council's residential and domiciliary services. The sanction of additional much needed beds was received towards the end of the year with considerable relief by members of the medical profession working within all three parts of the National Health Service.

Acknowledgments

It is an unenviable task to single out members of the staff for especial thanks when all, without exception, have worked so loyally as a team in support of the work of the department, but it is from time to time fitting to make appreciative mention of the heads of the main sections: Mr. Lindfield and the Public Health Inspectors whose prime task has been environmental health, housing visitations, and general sanitation; Mr. Little and the Welfare Officers with the responsibility of the Welfare Services and Mental Health; Miss Russell and her untiring team of Homes Nurses, Midwives and Home Helps; Mrs. James and her industrious and peripatetic Health Visitors; and Mr. Tarbuck, the Lay Administrative Officer, for his drive and initiative in co-ordinating and developing the work of all the sections with the assistance of the administrative, clerical, and secretarial staff.

Others receive acknowledgment in the School Health section of this report, but mention must be made of the continued hard and conscientious work of the lady Assistant Medical Officer, Dr. Marjorie Godson, whose sympathetic interest in the handicapped child must surely have been a comfort to many a parent.

I would again thank you, Mr. Mayor, and Members of the Council for your unfailing interest and support in the work of this department.

I am, Mr. Mayor, Ladies and Gentlemen,

Yours faithfully,

KENNETH VICKERY,

Medical Officer of Health.

PUBLIC HEALTH COMMITTEE

(as constituted at 31st December, 1958)

The Mayor:

COUNCILLOR J. W. G. HOWLETT, J.P.

Chairman:

COUNCILLOR W. E. HAFFENDEN

Deputy Chairman:

COUNCILLOR J. B. COVENTRY

Councillors:

MISS M. M. M. FENWICK-OWEN

Mrs. W. L. Lee Mrs. F. M. Llewellyn

F. A. POPE R. G. ROGERS

F. C. SOLLY

HEALTH SERVICES COMMITTEE

(as constituted at 31st December, 1958)

The Mayor:

COUNCILLOR J. W. G. HOWLETT, J.P.

Chairman:

Councillor J. B. Coventry

Deputy Chairman:

COUNCILLOR S. R. TOMSETT

Alderman:

S. M. CAFFYN

Councillors:

S. W. HOLDEN

A. S. HULBERT MRS. W. L. LEE MRS. F. M. LLEWELLYN

W. A. NEALE

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, 1958)

The Mayor:

COUNCILLOR J. W. G. HOWLETT, J.P.

Chairman:

COUNCILLOR S. R. TOMSETT

Deputy Chairman:

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

Councillors:

C. E. DOBELL A. S. HULBERT W. P. LEBBON Mrs. W. L. LEE Mrs. F. M. Llewellyn 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. (to 11.5.58) THOMAS ALFRED PLUMLEY, M.B., B.S., M.R.C.S.(Eng.), D.P.H., D.Obst., R.C.O.G. (from 2.6.58)

> 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:

J. N. CONNELL, Cert.S.I.B. L. G. HOWARD, Cert.S.I.B.

A. Matthews, Cert.S.I.B.

G. N. RICHARDS, 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. (to 10.4.58)
MISS N. E. RUSSELL, R.F.N., S.R.N., S.C.M., Q.N., H.V.Cert. (from 17.6.58)

Domiciliary Nurses:

(a) Whole-time:

MISS R. N. ANDREWS, S.R.N., Q.N.

MISS C. M. BISHOP, S.R.N., S.C.M., Q.N. (from 9.6.58) MRS. I. BOOTHROYD, S.R.N., R.F.N., Q.N. MRS. E. A. G. CHAPMAN, S.R.N. (to 11.1.58)

MISS D. W. COOPER, S.R.N. (from 20.1.58)

MISS M. A. GETHEN, S.R.N., Q.N. (to 31.12.58)

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. Mr. A. Rotchell, S.R.N., Q.N.

Miss H. E. Sacker, S.R.N., S.C.M. (1.3.58–30.4.58)

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.

Miss B. A. Peacock, S.R.N. (8.4.58–20.7.58)

Mrs. B. Pilcher, S.E.A.N. (to 30.4.58. From 15.9.58, temp.)

Mrs. M. E. Scott, S.E.A.N.

Mrs. M. W. Tutt, S.R.N. (from 2.6.58)

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. 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 B. E. KEEN, S.R.N., S.C.M., H.V.Cert. (from 22.9.58)

MISS M. J. PARTRIDGE, S.R.N., S.C.M., H.V.Cert. (to 4.8.58)

Home Teacher of the Blind:

MISS E. E. INESON

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:

E. TARBUCK, Chief Lay Administrative Officer

R. G. LARCHER, Senior Clerk

W. L. Peck

I. J. USHER
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
E. G. ELKINGTON

Dental Attendants:

Mrs. D. D. Stoner (née Sidley) Miss D. M. Clarke (to 4.10.58) Miss A. Bridgen (from 3.10.58)

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, 1958)

		F	full-time	Part-time	Total
Medical Officer of Health,	Deputy	and			
Assistant			3	_	3
Dental Officers			2	-	2
Clerical Staff, including Scho	ol Health	and			
Home Nursing Services			16	_	16
Dental Attendants			2	-	2
Public Health Inspectors			6		6
Health Visitors			9		9
Home Nurses (including Super			15	5	20
District Nurse/Midwife			1	_	1
Domiciliary Midwives			2	_	2
Blind Visitor			1	_	1
Welfare Officer and Authorised	Officers		3	_	3
			7	5	12
Day Nursery			4	1	5
Occupation Centre			33	7	40
Old People's Homes				,	70
The Knowle (Home for Tempor			2	-	2 8
Old Town and Seaside Baths			1	1	8
Domestic Helps			1	38	39
Rodent Operators	- 11		2		2
Others—i.e., Cleaners, Caretake	ers, Van Di	river	3	6	9
			119	63	182
		-			

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—57,680

Lo	tilliated Wild-1	car rope	alation.	37,000	,	
Births				Male	Female	Total
Live Births-	-Legitimate			291	272	563
Dive birens	Illegitimate			16	24	40
	megremate					
				307	296	603
Still Births-	-Legitimate			4	4	8
	Illegitimate				-	-
				-	_	-
				4	4	8
Deaths				-	-	-
				120	570	1 016
All causes .				438	578	1,016
					E	ngland
			Ea	stbourne	8	d Wales
Live Births .				603	73	8,323
Live Birth Rate p	er 1,000 popul	ation		10.45		16.4
Live Birth Rate						
applying "Area	Comparability	Factor"	(1.14)	11.9		_
Still Births .				8	1	6,274
Still Birth Rate p	per 1,000 live a	nd still l	oirths	13.0		21.6
Total live and sti	ll births			611	75	4,597
Infant Deaths .				6	1	6,620
Infant Mortality	Rate per 1,000	live bir	ths—			
				9.9		22.5
Infant Mortality	Rate per 1,00	00 live b	oirths			
8				10.6		-
Infant Mortality	Rate per 1,00	00 live b	oirths			
illegitimate .				0.00		_
Neo-natal Mortal				4.9		16.2
Illegitimate live b	irths—percenta	ge of tota	al live			
births .				6.6		
Maternal Deaths				_		326
Maternal Mortalit	ty Rate per 1,00	0 live and	d still			
births .		: .		0.00		0.43
Death Rate (Crud				17.7		11.7
Death Rate after		ea Com	para-			
bility Factor" (11.68		
Deaths from Tub				11		4,480
Tuberculosis Dea	th Rate per 1,00	00 popul	ation	0.19		0.1

Causes of Death				
,		Males	Females	Total
Tuberculosis, respiratory		5	4	9
Tuberculosis, other		1	1	2
Syphilitic disease		-	_	_
Whooping Cough		_		_
Malignant neoplasm, stomach		10	12	22
Malignant neoplasm, lung, bronchus		28	8	36
Malignant neoplasm, breast		_	17	17
Malignant neoplasm, uterus		_	8	8
Other malignant and lymphatic neoplasms		47	40	87
Leukaemia, aleukaemia		3	4	7
Diabetes		2	10	12
Vascular lesions of the nervous system		69	140	209
Coronary disease, angina		96	63	159
Hypertension with heart disease		5	9	14
Other heart disease		51	129	180
Other circulatory disease		14	22	36
Influenza			4	4
Pneumonia		17	38	55
Bronchitis		19	10	29
Other diseases of the respiratory system		12	1	13
Ulcer of stomach and duodenum		7	2	9
Gastritis, enteritis and diarrhoea			2	4
Nephritis and nephrosis		2 5	7	12
Hyperplasia of prostate		5		5
Pregnancy, childbirth, abortion		_	_	_
Congential malformations		3	1	4
Other defined and ill-defined diseases		26	31	57
37 . 1:1 . :1		4	2	6
All other accidents		4	11	15
Suicide			2	4
Homicide		2	_	1
Homicide				
		438	578	1,016
1 15 -11-				
Age Mortality		Males	Female:	s Total

Under 1		2	4	6
1–5		1	1	2
5–15		_		- 2
15–25	**	3		3
25–45		11	9	20
45–65		80	76	156
65–75		127	127	254
75 and over		214	361	575
		120	E70	1.016
		438	578	1,016
		-	-	-

Deaths from Cancer

	V D. t			Age Groups					Total	Death
	Year Populati	Горшаноп	0-1	1- 5	5- 15	15- 45	45- 65	65 and over	Deaths 1	Rate per 1,000 Population
Ten Years	1939 1940 1941 1942 1943 1944 1945 1946 1947 1948	59,470 53,760 27,750 30,960 27,380 27,980 39,300 49,790 53,540 56,610		- 1 - - 1 - - 1	1 - - - - - 1	12 4 1 4 3 2 6 4 7 5	69 37 24 30 29 26 43 54 31 35	30 53 48 48 52 67 79 69 87 92	112 95 73 82 84 95 129 127 125 134	1·88 1·76 2·64 2·68 3·06 3·43 3·28 2·53 2·33 2·36
	Total	_	-	3	2	48	378	625	1,056	-
Ten Years	1949 1950 1951 1952 1953 1954 1955 1956 1957 1958	56,880 58,050 57,510 57,200 57,190 57,600 57,830 57,850 57,860 57,680				9 9 4 4 8 4 3 5 3 9	40 54 46 46 55 33 51 46 58 40	79 100 77 94 85 96 113 103 124 121	128 163 128 144 148 133 168 154 185 170	2·25 2·80 2·22 2·51 2·61 2·30 2·91 2·66 3·20 2·95
	Total	_	_	1	1	58	469	992	1,521	_

NOTIFICATION OF BIRTHS

One thousand and twenty-one live births and seventeen still births took place in the Borough and were notified to the local authority. Six hundred and three live births and eight still births were to mothers resident in Eastbourne and four hundred and eighteen live births and nine still births were to mothers resident outside the Borough. In addition there were seven inward transfers of live births relating to Eastbourne mothers confined elsewhere than in Eastbourne.

Analysis of Notifications

	Resid	Residents		Non- Residents		Total	
	Live Births	Still Births	Live Births	Still Births	Live Births	Still Births	All Births
DOMICILIARY Local Authority Midwives	86	1	1	=	87	1	88
Total Domiciliary	07	1	1	_	88	1	89
Institutional Maternity Home St. Mary's Hospital Leaf Hospital Nursing Homes Inward Transfers	130	5 2 —	117 299 1 —	1 8 —	502 429 1 2 6	6 10 —	508 439 1 2 6
Total Institutional	523	7	417	9	940	16	956
Total, All Births, 1958	610	8	418	9	1028	17	1045
Notified Births: 1957 1956 1955 1954 1953	562 543 604	12 13 12 10 8	393 367 361 349 313	6 7 7 9 4	980 929 904 953 945	18 20 19 19 19	998 949 923 972 957

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: 22,146.

RATEABLE VALUE year ended 31st March, 1959—£1,348,903.

GENERAL RATE-14s. 4d.

PRODUCT OF A 1d. RATE—£5,390

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 Home Nursing, 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.

THE FIRST TEN YEARS OF THE NATIONAL HEALTH SERVICE

There being no day to day local co-ordination organization between the three parts of the National Health Service, it is probably true that the local health authority medical officer of health is as well placed as any to observe the merits and the shortcomings of the whole service. Certainly he is probably in initial receipt of more enquiries and comments from the public on the whole service than anyone else.

It may be said in consequence of such observation that within the financial and physical resources available a very high standard of hospital, general practitioner, and local authority service prevails in Eastbourne and that co-operation between the officers and the members of the respective managing committees is full and effective.

Such weakness in the service as has been observed is of national rather than local application. It seems quite wrong for instance that the provision of domiciliary services like midwifery, home nursing, mental welfare, should be planned and financed by an authority having no relation whatever to the authority responsible for planning and financing the provision of hospital beds, the demand for which is so clearly conditioned by the provision of the former.

Notwithstanding the existence of a Joint Health Consultative Committee which has served a useful purpose in tackling problems of mutual concern, such as the aged and chronic sick, there exists no machinery to enable the overall health services of the area to be planned in relationship to respective domiciliary and institutional need at local level, or indeed at any level.

Membership by the Medical Officer of Health of the Group Medical Sub-Committee and the Local Medical Committee is a useful liaison with the other two branches of the service but it would be too much to hope that it could ever materially influence the local planning of the respective authorities.

The department's work in maternal and child care is performed under several sections of the National Health Service Act. Attendances at child welfare centres have been well maintained and group and individual health education has been substantially developed within the centres. Education in healthy feeding habits and in the development of sound mental health within the family have been singled out for special attention as being the two most significant factors in the pursuit of health.

The local health authority's part in clinical ante-natal care has steadily declined in favour of the general practitioner and consultant services, but flourishing health education classes for expectant mothers (and fathers) have arisen to fulfil a necessity for which other parts of the National Health Service are not equipped. Whatever one may feel about the wisdom of perpetuating a divided service, it is difficult to make serious criticism in the face of recent local dramatic falls in maternal and child mortality.

The day nursery has more than continued to justify its existence and has assisted in many cases of young children with physical and emotional problems.

Co-operation in the wider realm of child care has been greatly facilitated by the removal of the Children's Department from the environment of the Town Hall and police courts to the more appropriate location of the central health department premises. Inevitable overlap of responsibilities of child care officers and health visitors is now in practice reduced to a minimum.

The responsibility of the health visitor has continued to increase. The integration of welfare services for the aged and handicapped within the department has enabled her to play an active part in their care without overlapping the responsibilities of other welfare workers. Co-operation with the hospital authority has been strengthened by a member of the health visiting staff being responsible with the Group Medical Superintendent for the assessing of priorities of admission to hospital of the chronic sick.

The home nursing and home help services have increasingly contributed towards the care of the aged at home, supported by health visiting and meals on wheels services. Specially designed housing units under the overall care of a warden have also enabled more old people to look after themselves thus relieving pressure on the Council's residential homes for the aged and ultimately upon hospital beds.

Vaccination and immunisation has been well sustained in regard to smallpox, diphtheria and whooping cough. By far the major part of the immense programme of poliomyelitis vaccination has been undertaken by direct sessional arrangements within the department. The rising list of antigens has now made urgent the problem of personal records. One would make a strong plea that the Medical Research Council or other appropriate body be asked to keep constantly under review the antigens for childhood immunisation, the ages at and order in which they should be given including combinations of antigens, and that such advice should be urged upon all local health authorities and, in turn, upon general practitioners. The present position is very unsatisfactory. Practices differ widely between respective local health authorities and among practitioners within them. Understandably there may be differences of opinion in the light of the available knowledge at any given time. Nevertheless, in the interests of uniformity there must surely be an optimum of advice which a responsible committee could provide at any given time.

The ambulance service continues to receive ever greater demands, mostly from other branches of the service. Probably no authority could run this service more economically than the local health authority; nevertheless, there is much to be said in favour of the hospitals—the largest user—being responsible for the administration of this service which is so little related to preventive medicine, the prime function of the local health authority.

The changing pattern of tuberculosis in the community has been reflected by the move in the latter part of the decade of the Chest Clinic from local authority premises to a position within the hospital curtilage where diagnosis and treatment of other chest diseases is facilitated and where there is a readier access to X-ray facilities. It is to be hoped that the social needs of the not inconsiderable number of persons on the tuberculosis register will receive no less consideration as a consequence of this move.

The development of the mental health services has been steady but not spectacular. The mental hospitals have not been backward in implementing the spirit of the Royal Commission's Report towards community care of the mentally ill. One of the effects of this has been an increasing difficulty in securing the admission of the chronic mental patient for whom active treatment offers little hope of permanent cure. Hallucinated, deluded, disorientated, restless and agitated persons have appeared and remained in the community in greater numbers than hitherto and in advance of the community being conditioned or equipped to deal with them. Such persons can cause havoc among residents and staff in homes for the aged, despair to their relatives

when living at home, and perplexity to the police when manifesting disturbances in public places. On the other hand, the willingness of the psychiatrists to come outside their hospitals and give active help and advice in the patients' homes and in institutions is a valued development, and one would look forward to this work being further extended by the establishment of day hospital facilities in the district.

In concluding this brief review, one would say that, having regard to the tripartite division of the National Health Service (now evidently sacrosanct and unalterable), the pounding it regularly receives from the politicians, the manifest individualism of the participating doctors, the unplanned and illogical delineation of local government boundaries and the administrative structure of the Ministry of Health (the subject of recent constructive criticism), the wonder is that the service works at all. That, in fact, a tolerably efficient service operates here at local level is a tribute to the good sense of the members and officers of the respective parts of the service.

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, 1958, was £76,147, towards which an exchequer grant of £31,200 was received. After deducting other income the net rate borne expenditure was £33,121, representing £573 per 1,000 population compared with an average expenditure of £581 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 and Post-natal Care

The developments outlined in my Annual Report for 1957 were continued during the year. Approximately 60 per cent. of expectant mothers in the town made an average of between two and three attendances at the weekly educational or relaxation and exercise classes conducted by the health visitors and midwives. The majority of those expectant mothers were booked for confinement in the local hospitals which illustrates the increased co-operation between general practitioners, hospital and local authority services.

During the early part of the year the already liberal use of visual and sensory aids was implemented by the installation of kitchen equipment enabling practical demonstrations of cookery and simple food preparation to be given to expectant mothers.

I am indebted to Mr. H. Simmonds, District Manager, South Eastern Gas Board, for his most generous practical help in providing the equipment and arranging for demonstrations to be given by trained members of his staff who have worked in close co-operation with the staff of the department.

Classes were conducted in cycles of eight weeks and during each course parentcraft evenings conducted by the medical and health visiting staff were included. These were well attended even during inclement weather.

Details of	sessions a	and attend	ances, etc.,	are as	follows:-
------------	------------	------------	--------------	--------	-----------

Number of sessions held		48
Total attendances		950
Number of expectant mothers attending		363
Number of new cases		137
Number examined by medical officers		6
Number of blood specimens taken for Rh factor		123
Number referred for dental treatment to l	ocal	
authority's dental centre		18
Number referred to own doctor		29

Maternal, Infantile and Child Mortality

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

The deaths occurred of six infants (two males and four females) under one year of age. Two children died between the ages of one and five years. Details are as follows:

Death of Infants Under One Year of Age

Age	Sex	Cause of Death
4 months	F	I. (a) Cortical venous Thrombosis. (b) Patent interventricular Septum.
2 days	F	I. (a) Haemorrhagic Pneumonia.
1 week	M	I. (a) Cardiac failure. (b) Fibro elastosis.
1 month	F	I. (a) Asphyxia. (b) Child burying her head in bed clothes of "karri-cot".
1 day	M	I. (a) Prematurity, 3 lbs. 4 oz.
4 months	F	I. (a) Toxaemia. (b) Acute gastro-enteritis. (Bacterim Coli No. 026.)

Deaths of Children aged One to Five Years

2 years	M	I. (a) Acute Lymphatic Leukaemia.
2 years 10 months	F	I. (a) Multiple injuries including
		fractured skull and laceration
		of brain and liver. Running
		into side of moving coal
		lorry.

Maternal and Infantile Mortality, 1894-1958

Years	Infant Deaths	Infantile Mortality Rate	Maternal Deaths	Maternal Mortality Rate
1894-1903 Average	 108.5	118-2	3.6	4.56
1904-1913 Average	 79.3	96.6	2.6	2.91
1914-1923 Average	 52-3	68.8	1.5	1.93
1924-1933 Average	 30.0	45.7	1.5	2.20
1934-1943 Average	 23.6	42.4	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	_	_
1958	 6	9.9		_

Prematurity (i.e. babies weighing $5\frac{1}{2}$ 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

Place of Birth	K	Resident	Non-Resident	Total
Own Home		7	-	7
Maternity Home		11	3	14
St. Mary's Hospital		19	23	42
Leaf Hospital			1	1
		37	27	64

(b) DEATHS OF PREMATURE INFANTS WITHIN 28 DAYS

(i) Died in first 24 hours	Resident	Non-Resident	Total
St Mary's Hospital .		3	3
Maternity Home .	. 1	II. III.	1
	_	-	-
	1	3	4
	The state of the s		-
(ii) Died within 1-28 days			
St. Mary's Hospital .	. —	1	1
Maternity Home .		_	-
	-	_	_
	-	1	1

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.

Eastbourne girls were accommodated in Homes and Hostels outside Eastbourne for a total period of 172 days, and in the Bell Hostel, Eastbourne, for a total period of 100 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:-

Number of children who	Born in 1958	Born in 1957	Born in 1953-56	Total
Number of children who attended during the year .	. 468	410	579	1,457
	Aged Under 1	Aged I-2	Aged 2-5	Total
Number of attendances made by children	8,744	1,741	1,227	*11,712

^{*}This represents a substantial increase in total attendances at the centres for the fourth successive year.

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 is 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

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

REPORT OF THE CHIEF DENTAL OFFICER

Sixty-six sessions were devoted to the inspection and treatment of expectant and nursing mothers and to children under the age of five.

Sixty-one expectant and nursing mothers were seen at the Avenue House clinic and made 185 attendancs. Of these, fifty-six were found to require treatment and forty-two were treated. Eighteen fillings were inserted and fifty-five teeth extracted. Five complete dentures and nine partial dentures were constructed, the laboratory work being undertaken by local dental technicians in their own laboratories.

With the use of the dental department's own X-ray apparatus, radiological examinations were carried out on fourteen patients.

Two hundred and one children under five were inspected, 138 found to require treatment, and 124 were treated. Fifty fillings were inserted into temporary teeth and 191 temporary teeth were extracted. All these extractions were performed under general anaesthesia, nitrous oxide and oxygen, and this anaesthetic was administered on 115 occasions. In addition, conservative treatment with silver nitrate was carried out on a further thirty-seven temporary teeth. Six preschool children were also referred for X-ray examination.

These very young children pose a particularly difficult problem to the dental surgeon. From the patient's point of view, dental treatment at the best time is often tedious and sometimes unpleasant and, although pain can be abolished by anaesthetics, even the administration of these anaesthetics can be frightening.

In no field of dentistry, therefore, does the question of prevention seem more important than in these particular age groups, and every effort has been made to impress on parents, both with regard to diet and methods of oral hygiene, the most satisfactory answer to this problem. At my talks to Young Wives' Groups, it has been encouraging to find that greater appreciation of this aspect is now becoming much more apparent.

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

Dental Treatment Return

(a)	Numbers Provided Wit	H DENTAL	CARE		Made
			Needing		Dentally
	Expectant and Nursing	Examined	Treatment	Treated	Fit
	Mothers	61	56	42	28
	Children under five	201	138	124	101

(b) Forms of Dental Treatment Provided

	Scaling	TUDI	Silver Nitrate	Crowns	Extrac-	General	Dentures Full	Provided Partial	Radio-
	and Gum Treatment		Treat- ment	or Inlays	tions	Anaes- thetics	Upper	Upper or Lower	graphs
Expectant and Nursing Mothers	19	18	_	-	55	19	5	9	14
Children under five	-	50	32		191	115	-	_	6

PRINCES PARK DAY NURSERY (60 Places)

The authorised establishment, excluding domestic staff, was:—
Matron, Deputy Matron, Warden, three trained Nursery Nurses, and
four Nursery Assistants

The total attendances were 13,619, an average attendance of 44·3 for the 307 days on which the nursery was open, compared with 11,634 attendances and a daily average of 37·9 during 1957.

The unit cost per approved place was £103, and per child in attendance £160, for the year ended 31st March, 1958.

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

	1958	1957	1956	1955
January	32.5	33.9	34.3	29.1
February	40.7	32.9	32.1	36.0
March	43.1	36.6	34.2	39.1
April	46.0	40.5	39.0	41.3
May	53.0	42.0	44.7	46.6
June	54.3	45.4	47.4	49.8
July	52.2	35.4	48.2	39.9
August	46.0	45.0	45.3	45.2
September	43.0	40.1	36.9	45.3
October	42.2	32.2	41.3	45.4
November	38.9	35.0	41.6	42.4
December	40.1	36.0	39-1	45.0

Attendances each month during 1958:-

		Children aged			Total	No. of	D	
		0-11/2	11-3	3-5	- Attend- ances	days open	Receipts	
January		5.3	12.4	14.7	878	27	£128 3 8	
February		6.2	15.1	19.4	978	24	£163 0 8	
March		6.2	15.8	21.0	1,122	26	£,228 13 0	
April		6.8	16.8	22.4	1,103	24	£178 4 8	
May		6.9	18.8	27.2	1,379	26	£302 18 10	
June		7.9	18.0	28.4	1,359	25	£249 19 2	
July		7.2	18.3	26.7	1,411	27	£,243 2 4	
August		5.0	18.5	22.5	1,152	25	£,256 11 4	
September		5.7	16.8	20.4	1,120	26	£196 5 4	
October		6.0	16.3	19.8	1,140	27	£,205 0 6	
November		5.8	16.6	16.4	973	25	£,253 19 0	
December	* *	4.5	17.0	18.6	1,004	25	£190 15 2	
TOTAL					13,619	307	£2,596 13 8	

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 percentage of domiciliary confinements continues to decrease, but only one mother did not book a doctor or a midwife until labour commenced. Trilene is given in a greater number of cases than Gas and Air and is much appreciated by the mother, but the need for the administration of Pethidine has been practically halved since relaxation classes have been given.

During the year the midwives visited all mothers booked for home confinement, including any mother referred to them by the doctor or hospital. The increasing amount of clinical ante-natal care undertaken by the midwives in the patient's home is reflected in the greatly increased number of ante-natal visits shown in the table. Relaxation classes have been most successful and are well attended, the success being shown by the decreasing need of drugs during labour, with the resultant well-being of the mother and infant.

The midwives co-operate with the health visitors and the service continues to maintain a high standard of proficiency.

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.

	Total Births	Domiciliary Confinements	Percentage of Domiciliary Confinements
1954	604	109	18.0
1955	543	107	19.7
1956	562	92	16.4
1957	599	96	16.0
1958	618	87	14.7

It is to be noted that the number of institutional confinements is now in excess of 85 per cent. of the total births.

The cost per case attended was £21 13s. 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,	1958	32	MI
New bookings		95	
Number of cases on books on 31st December,	1958	34	

CONFINEMENTS

(a) Doctor booked— Doctor present Doctor not present				28 16
(b) Doctor not booked— Doctor present Doctor not present				- 42
(c) Miscarriages				3
ANALGE	SIA				
,	a) Can and Air				
(a) Gas and Air— Doctor present				1
	Doctor not present				î
,		(4.4)			
(b) Trilene—				25
	Doctor present				25
	Doctor not present				48
(c) Pethidine—				
	Doctor present				5
	Doctor not present				12
I	Medical aid was sought in tv	venty-one	e cases.		
VISITS 1	BY MIDWIVES				
1	Ante-natal visits			-	1,285
	Visits during labour		Table .		175
	Visits during puerperium				1,715
	Post-natal visits (domiciliary	cases)			400
7	Visits to 102 cases discharge	d from h	ospital bef		
	the fourteenth day				426
				-	3,703

Training of Pupil Midwives

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

HEALTH VISITING

Establishment

Superintendent Health Visitor Nine Health Visitor/School Nurses

Allocation

National Health S	ervice	Act	 71
School Health Ser	vice		 21/2

There was one staff change during the year due to resignation. Sickness absenteeism and the time lag in making a new appointment, in conjunction with the pressure on the health visitors for selective visits and attendances at clinics and health education sessions, resulted in fewer domiciliary visits for maternal and child welfare purposes. There were, however, increased attendances of mothers and children at the child welfare clinics requiring an additional session at Acacia Villa, whilst the poliomyelitis vaccination campaign made severe demands on the health visitors' time. The impact of growing public awareness of the need for social welfare and health education resulted in an increasing liaison with hospitals and voluntary and other agencies. The health visitor's task has become much more exacting, demanding a wide knowledge of human problems and of the techniques to deal with them. Provision for in-service training has become an essential annual feature of the budget to enable the health visitors to cope with their tasks.

The health visitors' work is summarised in the following figures:—

Home Visits

CARE OF MOTHERS AND YOUNG CH	IILDREN-		
Children under 1 year			2,693
Children aged 1 and under 2 ye			
Children aged 2 but under 5 year			
Expectant mothers			
In connection with Day Nurser			
Infectious Illness			
TUBERCULOSIS			709
CARE AND AFTER-CARE (includi			
Handicapped Persons)			2,996
Other Visits			
To other Agencies (voluntary orga	nizations,	etc.)	163
To Day Nurseries			44
To Hospitals			323
11 11			
Clinic Attendances			
Child Welfare Centres			503
Immunisation and Vaccination Cli			240
Health Education Sessions			0.1-
			99
Chest Clinic			99

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).

During 1958 there were several changes in the staff, the Superintendent left to go to Australia and there were three new appointments of State Registered Nurses and a Queen's Nurse with temporary parttime personnel being used prior to the full-time appointments. There was also some sickness but not for long periods; the Asian influenza fortunately missed the staff.

The work in the Borough remained very much the same although the actual number of cases attended and the visits paid were less than in 1957. This was partly due to the increased co-operation of the friends and relatives of the patients and the changing pattern of medical treatment. The staff continued to give loyal and willing service to the community and many grateful letters were received.

The number of chronic sick patients nursed at home continued to increase and this is likely to continue until more hospital beds are available. To help the nurses and patients a hoist for lifting heavy patients in and out of bed was obtained and has already proved its usefulness.

Good co-operation between the Geriatric Health Visitor and the other members of the Public Health staff, as well as with the voluntary bodies, has allowed the patient to be adequately cared for while waiting for a hospital bed and to be discharged from hospital at the earliest possible moment. An additional word of appreciation is due to the St. John Ambulance personnel for their help during the year.

A post-graduate course was attended by one member of staff and others will be attending them in 1959. These courses are essential to keep the staff up to date with the latest trends in medicine and to help widen their horizon by having contact with the district nurses from other areas.

Particulars of patients nursed are as follows:

	New Cases	Total Cases	Visits
Medical	 726	810	15,509
Surgical	 172	197	4,960
Infectious Diseases	 _	_	-
Tuberculosis	 5	8	160
Maternal complications	 4	4	8
Others—Chronic	 394	648	25,812
	1,301	1,667	46,449

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

Convalescent	 	496
To Hospital	 	239
Deaths	 	177
Other Causes	 	398
		1,310

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

		Cases	Visits
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
1958	 	1,667	46,449

VACCINATION AND IMMUNISATION

General

The Authority's arrangements for this service remained as describgd in my report for 1957 except as indicated under the reference to Poliomyelitis vaccination.

A-Vaccination against Smallpox

During the year 490 persons were vaccinated for the first time and 489 were re-vaccinated.

Of the 490 primary vaccinations 410 were of infants under one year of age, which is equivalent to 67.9 per cent. of the registered live births in the area during 1958. This again compares satisfactorily with the figure of 64.8 for the previous year.

VACCINATION DURING 1958

		Primary V	accination	Re-Vaccination		
		By Staff of Health Department	By General Practitioner	By Staff of Health Department	By General Practitioner	
Under 1 year		195	215			
1 to 2 years 2 to 5 years	::	27 2 3 2	10	9	5	
5 to 15 years		3	5	116	5 45	
15 years and over		2	23	6	306	
		229	261	132	357	
		4	90	45	89	
		979				

From this table it will be seen that 410 infants under one year were vaccinated, 195 by the Medical Staff of the Department and 215 by General Medical Practitioners.

INFANT VACCINATION 1951-1958

Year	Live Births	Number of Primary Vaccinations under 1 year of age	Percentage of Births during same period
1958	603	410	67-9
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 an increase as compared with the previous two years. It is calculated that 60 per cent. of infants born in 1957 were immunised before the first birthday.

In 1958, 495 children were immunised, 302 by the Medical Staff of the Department and 193 by General Medical Practitioners.

The age groups and numbers were:

Age Group	By Medical Staff of the Department	By General Medical Practitioners	Total
0-1	199	167	366
1-4	76	18	94
4-5	5	_	5
5-10	16	5	21
10–15	6	3	9
	302	193	495

Reinforcing Doses

The age groups and numbers were:

Age Group at	By	By	Total
time of	Medical Staff of	General Medical	
Immunisation	the Department	Practitioners	
1–5	55	19	74
5–15	423	95	518
	478	114	592

The Department's immunisation records show that at the end of the year 1,748 children 0-5 years and 6,367 children aged 5-15 years had been immunised. The age groups and numbers were:

Age Group at	Number	Total
31.12.58		
0-1	117	
1–2	351	
2-3	364	
3-4	379	
4-5	537	
	_	1,748
5–6	642	
6–7	510	
7–8	478	
8–9	524	
9–10	551	
		2,705
10–11	778	
11–12	840	
12–13	779	
13–14	583	
14–15	682	
	-	3,662
		8,115

These numbers represent 62 per cent. and 82 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.

Age at 31.12.58 i.e., born in the year	Under 1 1958	1-5 1957-54	5–10 1953–49	10-15 1948-44	Under 15 Total
Last complete course of injections given during 1954–58	117	1,631	1,945	1,567	5,260
Estimated mid-year child population	600	2,200	7,8	300	10,600
Immunity Index	19.5%	74.1%	45.	0%	49.6%

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

C-Whooping Cough Immunisation

There was a further small increase in the numbers of immunisations against this disease. Approximately 66 per cent. of children are immunised before the first birthday. Only five notifications of whooping cough were received during the year, this being the lowest figure ever recorded in this series of reports.

IMMUNISATION DURING 1958

Ann		ical Staff epartment	By General Practitioners		Totals	
Age Groups	Primary	Re- inforcing	Primary	Re- inforcing	Primary	Re- inforcing
0-1	234	_	162	_	396	_
1-2	22	_	13	_	35	-
2-3	4	-	3	2	7	2
3-4	3 5	-	1	1	4	1
4-5	5	58	3	11	8	69
over	22	125	4	5	26	130
Totals	290	183	186	19	476	202

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

Year	Cases Notified
1954	130
1955	37
1956	26
1957	117
1958	5

D-Vaccination against Poliomyelitis

Supplies of British, American and Canadian vaccine were received throughout the year and enabled the vaccination programme to proceed fairly smoothly.

The age group was again extended to include those born in 1933–1958 and the third dose seven months after the second was introduced towards the end of the year. Some thirteen thousand injections were given at Local Authority schools and clinics during the year mainly by General Practitioners working under departmental arrangements on a sessional basis.

After one particularly noisy clinic it was comforting to receive the undermentioned letter from a seven-year-old written on children's notepaper:

Dear Doctor,

I am very sorry for being so naughty this afternoon.

I apologise to you and to the nurse.

C—— B——.

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Two unusual enquiries during the year were, "Could we supply a brown tiled fireplace for her front room?", and a benign old gentleman asking, "Did we stock chandeliers?" Both of whom had mistaken the busy vaccination office for a part of a neighbouring departmental store.

POLIOMYELITIS VACCINATION 1958

Year of Birth		By epartment	By General Practitioners	
	Two Injections	Third Injection	Two Injections	Third Injection
1933-42	686	14	7	2
1943	528	74	-	_
1944	568	72	2	-
1945	460	60	_	-
1946	535	86	2	_
1947	315	281	1	1
1948	210	266	1 3	1
1949	162	246	_	1
1950	163	189	3	-
1951	207	137	3 3 1	2
1952	222	152	1	_
1953	238	141	4	_
1954	235	113	3	-
1955	236	119	3	-
1956	269	93	4 3 3 3 7	-
1957	205	25		-
1958	23	3	2 2	-
Expectant Mothers	126	27	2	-
Hospital Staff	21	2 15	-	4
Ambulance Staff	21	15	-	-
Families of General				
Practitioners	12	-	4	-
TOTALS	5,442	2,115	50	11

In addition 156 staff at the local hospital were vaccinated with two injections.

AMBULANCE SERVICE

This service continued to be operated on behalf of the Authority by the Eastbourne Division of the St. John Ambulance Brigade. Acknowledgement is made to the very strong spirit of voluntary service which exists in the Brigade whose members voluntarily assist in the conduct of the service at night and provide valuable help in escort duties.

Despite an increase of some 4,000 patients carried in sitting-case cars and dual purpose vehicles during the year, the increase in journeys and mileages was not significant as compared with previous years—a tribute to the efficient organisation of the service by Superintendent A. J. Burnage.

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

	Ambulances			Sitting Case Cars			
	Journeys	Patients	Mileages	Journeys	Patients	Mileage:	
January	 261	447	2,197	413	1,101	4,114	
February	 269	416	2,300	384	1,148	3,630	
March	 241	383	1,724	430	1,274	3,705	
April	 248	374	2,773	407	1,183	4,068	
May	 271	401	2,475	320	1,294	4,196	
June	 261	362	2,160	455	1,439	4,335	
July	 293	406	2,785	488	1,594	4,280	
August	 308	450	2,648	370	1,182	3,845	
September	 272	373	3,075	339	1,115	3,284	
October	 369	385	2,690	389	1,266	4,008	
November	 262	403	1,916	351	1,173	3,855	
December	 287	447	2,424	326	1,078	4,276	
TOTALS	 3,342	4,847	29,167	4,672	14,847	47,596	

Journeys and Mileages since 5th July, 1948

			Ambi	ılances	Sitting (Case Cars
			Journeys	Mileages	Journeys	Mileages
1948						
(5th July	to 31st	Dec.)	1,427	23,127	757	30,415
1949			2,898	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
1958*			3,342	29,167	4,672	47,596

[†] Excluding Princes Park Day Nursery

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:—

Conveyance used to Statio	n	Patients	Train Milage
Ambulance		 133	13,567
Sitting Case Car		 349	22,858

^{*} Excluding Occupation Centre

ORIGIN OF CALLS

Origin of Calls			Ambulances	ces			Sitt	Sitting Case Cars	Cars	
	1954	1955	1956	1957	1958	1954	1955	1956	1957	1958
Emergency calls to street	472	594	590	603	645	41	51	45	59	69
Local Hospitals	2,210	1,898	1,888	2,092	1,853	1,280	1,224	1,033	1,167	1,182
Local Convalescent Homes	27	28	43	30	26	216	216	200	219	151
General Medical Practitioners	643	663	683	731	730	348	353	427	623	577
Maternity Homes	18	18	20	20	17	12	6	12	7	9
Nursing Homes	57	39	36	42	35	4	2	2	13	11
Ministry of Pensions	24	15	7	12	25	86	119	106	130	9/
Other Ambulance Authorities	61	72	48	92	109	342	332	433	458	398
Authorised Mental Health										
Officers	47	53	61	35	33	92	118	104	102	99
Others	362	275	218	297	334	141	79	131	134	105
Out-Patients:										
Chest Clinic	180	128	108	78	28	723	644	397	455	294
Foot Clinic	1	1	1	1	1	274			19	
Local Hospitals	88	193	339	199	875	7,204	7,535	7,317	4	10,183
Royal Sussex County						-	-00	***	1,00	
Hospital, Brighton	20	27	11	121	107	591	284	999	1,067	1,524
Infectious Diseases	34	30	1	1	1	1	1	1	1	
Total Calls	4,243	4,033	4,052	4,952	4,847	11,366	11,909	11,123	10,871	14,847
Tourneys	2,984		2,992	3,304	6	4,108	4,551	4,298	4,483	4,672
Mileage	28,480	27,739	24,092	29,155	29,167	45,760	48,987	47,278	44,266	47,596

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

Conveyance used to Station		Patients	Train Milage (approx.)
Ambulance	 	26	2,946
Sitting Case Car	 	8	460

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 of the year were:—

Ambulances		Date of	Year brought into
	Registration	first	Ambulance
Make	No.	Registration	Service
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
Austin	FHC. 450	24.11.1958	1958
Dual-purpose	Vehicles		
Bedford	BHC. 240	8.10.1952	1952
Morris	CIK. 700	11. 7.1955	1955
Morris	DJK. 327	1. 9.1956	1956
Sitting Case Ca	ars		
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

All the services of the department including particularly Home Nursing, Domestic Help, Day Nursery and the assistance and advice of the Health Visitors and Mental Health workers are freely available in all cases of illness.

B-Provision of Convalescence

The Authority's arrangements provide that all necessary care and after care is available to persons recovering from illness and to other invalids, including provision for convalescence in cases not otherwise provided for. This provision was extended during the year to provide for special convalescence and re-training facilities to prevent the break-up of families. One woman and her children were sent for a period of rehabilitation of four months at a nett cost of £91.

C-Loan of Equipment

The issue of sickroom equipment on loan plays a large part in the nursing care given to patients and this service is utilised to the full. The increasing trend towards rehabilitation of partially disabled patients has stimulated the demand for walking aids, commodes and wheel chairs particularly during the warmer months of the year.

Equipment is issued to homes where there is sickness and need, whether the District Nurse attends or not, at charges in accordance with the Council's scale, but with abatement of charge in necessitous cases.

Year	No. of Loans	No. of Patients	No. of cases in which no charge was made
1958	848	466	69
1957	707	385	91
1956	604	382	124
1955	750	395	95
1954	677	370	103

D-Voluntary Organisations

I wish to record grateful acknowledgement 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 work continued to develop as described in my report for 1957 and in this report under the sections devoted to Ante-Natal Care, Health Visiting and Midwifery.

During the year the Authority established a Home Safety Committee and appointed the Superintendent Health Visitor as Organiser who, together with the Health Visitors, prepared and manned an exhibit at the Winter Gardens during the New Homes and Trades Exhibition which attracted much attention. A "Guard that Fire" Campaign was successfully carried out in co-operation with local firms. Schoolchildren participated in a painting competition illustrating accidents and culminating in an artistic display of much merit at Avenue House Clinic. The Mayoress, Mrs. J. W. G. Howlett, kindly presented the prizes to the winning competitors.

Statistics and details of accidents supplied by local hospitals confirmed our belief that there remains a great volume of injury, suffering and disability capable of being substantially relieved by health education methods.

F-Sitter-up Service

This Service has increased over the past year and we have been fortunate in obtaining several excellent women who are willing to sit with very ill or confused patients thus relieving the relatives for a few nights.

Where possible the cost is borne by the patient or relative, but where payment is not possible, by the Local Authority. It is a fluctuating need and the demand is greatly increased during the winter months.

The Local Authority bore full or part cost in thirty-six cases at a total cost of £155.

Number of patients helped	 	57
Number of sitters-up used	 	18
Number of nights	 	258

G-Tuberculosis

Thirty-nine cases of respiratory and four of non-respiratory tuberculosis were reported. Of these, seventeen respiratory and three non-respiratory cases had not previously been notified in any other district.

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

NOTIFICATION REGISTER

	Respi	ratory	Non-Re	spiratory	Te	otal
	Males	Females	Males	Females	Males	Females
ON REGISTER 1st Jan., 1958 Add:	197	160	14	22	211	182
Notifications	9	7	3	_	12	7
Transfers Posthumous	10	12	-	1	10	13
Notifications	-	1	-	-	-	1
	216	180	17	23	233	203
Less:		-			172	
Deaths	5	4	2	_	7	4
Left town	13	6	2	1	15	7
Arrested	1	11	-		1	11
	19	21	4	1	23	22
On Register 31st Dec., 1958	197	159	13	22	210	181

Age grouping of new cases notified:

		Respi	iratory	Non-Re	spiratory	Te	otal
Age Groups		Males	Females	Males	Females	Males	Females
0-5		_	_	_	_	_	_
5-10		_	_	1	_	1	-
10-15		-	_	_	-	_	-
15-25		3	1	1	_	4	1
25-45		_	3	_	_	_	3
45-65		5	1	_	_	5	1
Over 65		1	2	1	-	2	2
	8.	9	7	3	_	12	7

DEATHS

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

	Respi	iratory	Non-Respiratory		
		Females	Males		
45-65	4	1	_	_	_
Over 75	1	3	1		1
The death rates	s per 1,00	0 populatio	n were:		
Respirator	y				0.15
Non-Respi					0.03
All forms					0.18
IMARY OF THE V	WORK OF	THE TUBER	RCULOSIS	VISITO	OR

SUMMAR

Visits paid to tubercu	ulosis ho	useholds	 709
Chest Clinic attendar	nces		 99
Visits to hospitals			 34

Extra nourishment granted to persons suffering from tuberculosis:

Liquid Milk:

Quantity supplied	 15,202 pints
Number of cases assisted	 57

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	 	 	9
1 to 2 years	 	 	2
	 	 	2
	 	 	2
10 to 15 years	 	 	4
Over 15 years	 	 	3

B-School-Children Scheme (carried out by the medical and nursing staff of the Department)

(i)	Number skin tested	 	360
(ii)	Number found negative	 	339
(iii)	Number vaccinated	 	339

CHEST PHYSICIAN'S REPORT

During 1958 there were 39 cases of tuberculosis added to our register of persons suffering from respiratory tuberculosis. Of these 17 were new cases diagnosed in Eastbourne and 22 were cases previously diagnosed elsewhere, who came during the year to live in the town. Forty names were removed from the register, 12 of these having recovered from the disease, 19 having left the town and 9 having died, 6 of them as a direct result of their tuberculosis. At the end of the year the register contained 356 names as compared with 357 at the end of 1957.

One of the new cases diagnosed during the year was, at the time of diagnosis, working in close contact with a number of other persons in one of the larger establishments in the town. It was felt that a special survey should be done and with the wholehearted co-operation of the management, 32 individuals from the department in which the patient worked were examined. Fortunately none was found to have contracted tuberculosis and it was therefore possible to give both the management and the staff complete practical (as opposed to theoretical) reassurance.

It might be worth while at this point to reiterate that, whereas tuberculosis is an infectious disease, the dangers of working in contact with a person suffering from the disease are not great. The very fact that the patient is allowed by his medical advisers to work should suggest to his (or her) colleagues that he (or she) is not thought to be infectious. If any person is at all worried by being or having been in such contact it is, these days, the easiest thing in the world to have a check X-ray of the chest and, according to our Eastbourne statistics, the chances of the X-ray showing any sign of tuberculosis are negligible.

In addition to the above survey 269 contacts were examined during the year, 38 for the first time. Twenty-seven of these were tuberculin negative and all accepted the offer of vaccination with B.C.G. Two of the new contacts examined were found to have early pulmonary tuberculosis requiring treatment. Both were young girls whose fathers were known to have the disease.

The thought of developing tuberculosis these days should hold no fear, for the effects of modern treatment are so satisfactory that the chances of complete recovery are very nearly 100 per cent. At the same time, the disease is preventable and our efforts to combat it should not cease until it is really prevented.

It is, as usual, a pleasure to acknowledge the great interest, help and co-operation in all ways of Dr. Vickery and Mrs. James and indeed all the staff of the Health and Welfare Services Department.

A. H. FERGUSON GOW, Chest Physican.

MASS RADIOGRAPHY

The East Sussex Mass Radiography Unit under the direction of Dr. B. S. Rigden carried out two special surveys in the area during March and September. These were limited to cases referred by medical practitioners, contacts of cases referred by the Department

and Chest Clinic, Mantoux positive school-children discovered during routine B.C.G. vaccination arrangements, and third year training college students.

Summary of the Results of the Two Surveys

Number of Persons X-rayed Number recalled for Large F				Male 594 85	Female 627 73	Total 1,221 158
Analysis of Abnormal Large Fil	ms:					
(a) Tuberculosis requiring	Treatr	nent o	r Close			
Clinical Supervision				1	3	4
(b) Tuberculosis requiring	Occas	sional	Clinical			
Supervision				4	5	9
(c) Malignant Disease				1	1	2
(d) Cardio-Vascular Diseases				5	3	8

Number (per 1,000 persons X-rayed) with Tuberculosis requiring Treatment or Close Clinical Supervision: 3.28

DOMESTIC HELP

There has been a great increase in the demand for Home Helps over the past year and there has been some difficulty in meeting all the genuine requests. It is a service for households where such help is required owing to sickness, including mental illness, for old people unable to manage and unable to meet the cost of private help, maternity cases if the need arises, as well as illness of a mother or her young family. Each applicant is visited by the Superintendent or her assistant. and assessed as to the need.

The staff has changed a good deal over the year but most have earned the praise and respect for the way often arduous tasks have been carried out, also for help given voluntarily over and above the actual time allowed.

The gross cost per case attended was £21 18s. compared with the average for all County Boroughs of £28 6s.

During the year 448 cases were granted the services of domestic helps. Charges according to the Authority's scale were reimbursed by the National Assistance Board in 222 cases.

				1	Vew Cases	Old Cases
According to Se	cale					
Full cost					102	27
Part cost					1	_
Free					9	1
Special Cases						
Part cost					34	18
Free					11	23
National Assist	ance Bo	ard Cases			82	140
					239	209
			Tota	al	4	48

MENTAL HEALTH SERVICE

Administration

The Health Services Committee remained the responsible Committee of the Council for functions under this Act. The staff remained, in number and personnel, as in my last Report.

Mental Illness-Admissions

For the first time since I have completed these Reports there was a reduction in the total number of admissions from 241 in 1957 to 193 last year. It should not be assumed from this that there is a lower incidence of mental illness. A more likely cause is the increasing implementation by the mental hospitals of the Royal Commission's recommendations towards community care, making admission more difficult.

Care and After Care

During the year the Mental Health Officers made 401 visits and 611 interviews were given at Avenue House. There was an increase in the number of calls dealt with after normal office hours by 32 to 146.

In addition to the above figures 158 visits were made in connection with Mental Deficiency.

Hospital Admissions

Figures for the past five years are as follows:

	Patients admitted to Mental Hospitals					
Year	Voluntary	Certified	Others			
1954	188	46	2			
1955	168	46	3			
1956	179	31	24			
1957	217	9	15			
1958	176	8	9			

The number remaining at 31st December, 1958, was 273—3 more than at the end of 1957. Of these 169 were voluntary patients.

St. Mary's Hospital

During 1958, 8 men and 20 women were admitted under Section 20.

One woman was admitted not under Order. Of the 8 men, 1 was certified, 2 were admitted as voluntary patients and 5 dealt with by relatives, etc.

Of the 20 women, 4 were certified, 6 admitted as voluntary patients and 10 dealt with in other manners (by relatives, etc.).

Hellingly Hospital

- (a) Certified Cases—Eight persons (2 male and 6 female) were certified. Of that total 1 was admitted from his own home and 7 from St. Mary's Hospital.
- (b) Urgency Orders—One man was admitted under this Section. He subsequently became a voluntary patient. Eight women were admitted—all became voluntary patients.
 - (c) Temporary Patients—No admissions during the year.
- (d) Voluntary Patients—The admission of 27 patients was arranged by the officers (8 men and 19 women). Of these 15 were admitted from St. Mary's Hospital and 12 from their own homes.

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

	St. Francis Hospital		Hellingly Hospital		Others		Total
	M.	F.	<i>M</i> .	F.	M.	F.	
December 31st, 1957	26	51	58	124	1	10	270
Admitted during year	2	3	60	128	-	_	193
Discharged during year	2	1	39	119	1	7	169
Died	2	4	10	4	-	1	21
December 31st, 1958	24	49	69	129	-	2	273

MENTAL DEFICIENCY ACTS, 1913-1938

Males—Seven males were added to the Register, 6 on notification of the Local Education Authority under Section 57 (3) and 57 (5) and 1 was discharged from the Guardianship Society.

Two males were removed from the Register, one Statutory Supervision case died and 1 Institutional case discharged.

Females—Two females were added to the Register, 1 from another Authority and 1 formerly dealt with under the Lunacy and Mental Treatments Act.

Two females were removed from the Register, both being discharged from Institutions.

Six males and 3 females were awaiting institutional care. One hundred and fifty eight visits were made to supervision cases.

The position at the end of 1958 was:

		Males	Females	Total
In Institutions		44	32	76
On Licence from Insti	itu-			
tions		_	1	1
Under Guardianship		4	3	7
Under Supervision		40	42	82
		_	_	-
		88	78	166
		_		

The Institution cases were placed as follows:

			Male	Female
Laughton Lodge			2	1
Brentry Colony			6	_
Stoke Park			6	3
Barvin Park			1	100
Princess Christian Farn	n Colo	ny	2	-
Rampton			1	_
St. Teresa's				8
Hortham			_	1
Etloe House			_	2
Darenth Park			9	3
St. Lawrence's			1	_
Pouchlands			2	_
Hill House			_	5
St. Helen's			2	
Leybourne Grange			8	2 7
Starcross			2	_
Manor Hospital, Epson	1		1	1
Ellen Terry Home			1	_
*				-
			44	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 22, with an age range of from 4 years to 45 years. These made a total of 3,124 attendances on the 199 days during which the Centre was open.

Notwithstanding small numbers the full-time continuation of the Centre has now been proved to be necessary. Search has therefore commenced for more suitable premises, having convenient access, a secluded garden and an adequate assembly hall.

SECTION C

WELFARE SERVICES

National Assistance Act

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

General

Once again the care of the aged has remained an acute problem throughout the year. I am pleased to record that All Saints' Convalescent Home has been acquired by the Regional Hospital Board and it is expected to open to receive patients towards the close of 1959.

No local authority beds will be available at All Saints as envisaged in my 1957 Report, but the annexe at Staveley Court is, in fact, open at the time of writing this Report, providing ten additional beds in that building.

St. Luke's Home will close at the end of 1959. The closure of this Home will be a great loss to the Authority and I must pay tribute to all the help and assistance rendered by the Home over the last fourteen years.

The autumn of the year was the occasion of the presentation to the Council by Mr. W. Keith Martin of a Morris Minibus for the purpose of providing old people in the authority's homes with the opportunity to enjoy the beauties of the Sussex countryside.

The Council's appreciation of Mr. Martin's generosity was marked by a suitable 'handing over' ceremony and, as evidence of the extent to which the old people appreciate the Minibus, nearly 1,000 miles have been run at the time of writing, with the summer of 1959 to come.

Residential Accommodation

Accommodation in the Council's Homes remained full throughout the year with a waiting list, although no really urgent cases were refused.

Tribute must once again be paid to the Superintendents and their staff, who have had to deal with many difficult cases throughout the year.

In addition to the 112 persons in the Council's Homes at the end of the year there were 21 cases in Voluntary Homes excluding The Wolds.

During the year there were 102 admissions, 81 discharges and 26 deaths.

Residential Accommodation—Section 21 (i) (a)

Figures for the year were as follows:

O			
1. CAVENDISH LODGE			Men
On 31st December, 1957			25
Admitted during the year			18
Discharged during the year			14
Died			4
On 31st December, 1958			25
0 m			
2. Trevin Towers		Men	Women
On 31st December, 1957		5	40
Admitted during the year		4	18
Discharged during the year		3	11
Died		1	7
On 31st December, 1958		5	40
3. Staveley Court			
On 31st December, 1957		8	36
Admitted during the year		9	26
Discharged during the year		10	21
Died		2	4
On 31st December, 1958		5	37
on old December, 1900		-	5,
4. St. Luke's Home			
On 31st December, 1957		-	7
Admitted during the year		-	24
Discharged during the year		-	14
Died		-	5
On 31st December, 1958		-	12
5. Voluntary Homes			
Royal Hospital and Home for Incur	ables,		
Putney			1
St. Elizabeth's Home, Seaford		72.2	1
Salvation Army Home, Wokingha	m		1
"Osidge" Chaseside (Sir Th	nomas	Lipton	
Memorial Hostel)			1
W.V.S. Home, Hove			1
Searchlight Cripples Workshop			1
B.L.E.S.M.A. Home, Portsmouth			1
Salvation Army Home, Westgate			1
mi i ii	1	21 12 50	

Other cases resident during the	vear u	vere:		
Bernhard Baron Cottage Ho	omes,	Polegate		1
Bethesda Home, Brighton				1
Nazareth House, Bexhill				1
Maurice House (British Leg	gion)			1
L.C.C. Home, 9, Fitzjohn's L. (a) Blind—The Wolds, College	Aver	nue, London		1
On 31st December, 1957				16
Admitted during the year				3
Discharged during the year				4
Died				1
On 31st December, 1958				14
(b) Epileptics			10 =0	

One man remained in Chalfont Colony at 31.12.58.

THE KNOWLE, OAK TREE LANE

During the year 11 families were accommodated, comprising 3 men, 11 women and 21 children. Whilst all of these were homeless, none was the strict legal responsibility of the Council under Section 21 (1) (b) of the Act.

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

Seven families were discharged during the year, comprising 2 men, 7 women and 12 children.

Remaining at the end of the year were 7 families, comprising 3 men, 7 women and 13 children.

ST. LUKE'S HOME

During the year 2 women and 3 children were accommodated.

Reception Centre—Section 17

This continued to be administered as agents for the National Assistance Board for the admission of male cases only. Tribute must be paid to the Superintendent of the Centre who is the Hospital Secretary of St. Mary's who has put a tremendous amount of personal effort into the supervision of the Centre and in dealing personally with the cases.

Total admissions were 2,888, an average of 7.90 per night. The Centre was full on 88 nights and 136 men were turned away during the year.

Handicapped Persons-Section 29

(a) BLIND PERSONS

(i) Incidence of Blindness—During the year 30 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:

	Cause of Disability						
	Cataract	Glaucoma	Retrolental Fibroplasia	Others			
(1) Number of cases registered during the year in respect of which Section F of							
Forms B.D.8 recommends (a) No treatment (b) Treatment (medical,	3	-	_	8			
surgical, optical)	10	3	_	6			
(2) Number of cases at (1) (b) above which on follow-up action have received							
treatment	9	1	-	6			

The recommendations for treatment were mainly medical and hospital supervision.

1	(::)	Dogietration
1	11)	Registration

Total at 31st December, 1957				211
Total at 31st December, 1958				216
Registered during the year				30
Died during the year				31
Transfers from other areas				10
Transferred to other areas	D .: 11 . C	-band Do		10
Decertified and transferred to	Partially S	ignted Re	gister	1

Age Group	Males	Females	Total
Under 5 years	 _	-	_
Between 5 and 15 years	 1	_	1
Between 15 and 30 years	 2	2	4
Between 30 and 50 years	 11	5	16
Between 50 and 70 years	 33	29	62
70 years and over	 35	98	133
	82	134	216
			-

At the end of the year of the persons on the Register aged 60 and over, 40 had cataract, 21 glaucoma and 6 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—An increasing number attended the occupation class at Green Street Health Centre, meeting on one afternoon per week under the Home Teacher.

(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 85 partially sighted persons on the Register, 18 male and 67 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 unchanged—the Chichester Diocesan Association for the Deaf and Dumb continued to act as Agents. The present total being 11 cases, of whom 3 are deaf/blind.

(e) HARD OF HEARING

Another excellent year has been put in by the Eastbourne and District Hard of Hearing Association. Work has been mainly on the social side, but 39 cases were registered as requiring help or visits on the welfare side.

(f) CRIPPLES

- (i) The Eastbourne Voluntary Association for the Care of Cripples continued to act as Agents under the same terms and conditions as in previous Reports. The number on the register at 31st December, 1958, was 92.
- (ii) Assistance with Alterations—During the year 5 cases on the Register of Handicapped Persons were assisted with alterations to their homes at a total cost to the Council of £64 15s.

Old People's Organisations

Meals on Wheels—This excellent service continued to be provided by the W.V.S. During the year 9,948 meals were supplied, an average of 38.1 per day. The cost to the Council was £,102 2s. 11d.

EASTBOURNE OLD PEOPLE'S WELFARE COUNCIL—This body continued to meet during the year and as the result of the action of Lady Lewisham a converted Southdown bus named "Polly" was presented to the Council for taking old and handicapped persons for rides. The bus, which is driven by volunteer drivers from the Corporation and Southdown Transport Departments, has been active throughout the year.

The Dale, Upperton Road, mentioned in my last Report, is providing homes for 7 elderly ladies and extensions are planned to provide accommodation for 16 further residents. The Eastbourne Homefinders Association is the body responsible for this Home.

OLD PEOPLE'S CLUBS—No change is recorded here and these Clubs provided a very valuable service both in those who attend the Clubs and in sick visiting and contact with members who become home-bound.

Registration of Homes-Section 47

There are now 17 registered Homes providing 237 beds.

Care of Property

This has continued to take up a lot of time of members of the Section and also occupied a considerable amount of space at the end of the year. The property of 35 persons was in care.

Burials

During the year 13 burials were arranged at a total cost of £262 16s. of which sum £202 7s. 9d. was recovered (72.26 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

Only 236 cases were reported to the Department and notified to the Registrar General. This was the lowest total for a number of years. Nine cases of scarlet fever and one of poliomyelitis occurred amongst residents of the area.

Notifications of Infectious Diseases (Corrected)

Notifiable disease	All ages	0-5	5-15	15-45	45-65	65 and over	Unknown
Scarlet Fever	9	2 3	6	1	_	_	_
Whooping Cough Acute poliomyelitis	5	3	1	1	-	_	-
(paralytic)	1	_	_	1	-	_	_
Measles	147	61	82	4	_	_	_
Acute pneumonia	20	1	3	1	4	11	_
Erysipelas	6	_	_	1	4	_	1
Food poisoning	2	_	_	_	2	_	
Puerperal Pyrexia	26	_	_	26	_	_	_
Tuberculosis (respiratory)	16	_	_	7	5	4	_
Tuberculosis (other)	3	_	_	2	-	1	_
Paratyphoid Fever	1	_	1	-	-	-	_
TOTAL	236	67	93	44	15	16	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 1957.

	Males		Females		Total		m
Condition	Old Cases	New Cases	Old Cases	New Cases	Old Cases	New Cases	Total all Cases
Syphilis	- (2) - (-(9)	1 (2) 4 (1) 21 (25)	3 (3)	- (1) - (10)	3 (5) (12)	1 (3) 4 (1) 28 (35)	4 (8) 4 (1) 32 (47)

Summary, 1949-1958

	(1)	(2) Non-V.D.		(3) Attendances	
	Total Cases	Cases included in (1)	For M.O'.s attention	(b) Intermediate times	(c) Total
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	29	57	_	57
1957	56	47	73	_	73
1958	40	32	62	_	62

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 chemical and 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 14th April to 1st November.

The numbers using the bath during this period were:

Organised Parties

Sessions for:

Local Authority Scho	ools	 	14,919
Private Schools		 	1,008
Youth Organisations		 	972
Mixed Bathing		 	7,779
Women and Girls		 	2,333
Men and Boys		 	1,903
			28,914

The users in the previous five years were:

	-		
1953	 	 	21,842
1954	 	 	22,420
1955	 	 	25,521
1956	 	 	32,045
1957	 	 	27,152

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:

Old Town Seaside	 Men 4,535 13,216	Women 3,815 8,003	Children 1,054 2,253	O.A.P. 413	Total 9,404 23,885
	17,751	11,818	3,307	413	33,289

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

ARTHUR LINDFIELD, M.R.S.H.

General Summary

Visits and inspections by the Public Health Inspectors in 1958:

For general public health purposes	4,506
Inspections under the Housing Act, 1957	805
In connection with food and to food premises	
Infectious Diseases Control visits and	
investigations	7
Prevention of Damage by Pests Act, 1949	400
Visits for miscellaneous purposes	1,284
	10.504
	10,594
	-

Food animals inspected at slaughterhouse . . 21,205

Inspection of Food and Food Premises

One of the prime necessities of life is the provision of an adequate supply of pure and nutritious food. Whilst the Public Health Inspector had not a great deal of control over the nutritive value of foods in general other than to ensure by sampling and analysis by the Public Analyst that the food is up to the standard claimed by the producer and of the nature, quality and substance demanded, purity and cleanliness of food is a matter which gives rise to much unspectacular routine work at food premises generally.

It is our experience that whilst it is a relatively simple matter to educate food handlers on the necessity for the prevention of contamination of food by visible dirt or the like, both from the aesthetic and health viewpoint—although on occasions this opinion is of doubtful validity—it is a very different matter to make them understand and appreciate the far greater potential dangers of bacterial contamination. Indeed, as any minister of religion would agree, the teaching of "things unseen" presents a far more formidable proposition. It is for this reason that the need for constant vigilant inspection is particularly necessary during the summer season at those premises where experience indicates there might be a tendency for hygienic requirements to be relaxed. Nevertheless, despite the fact that during the season so much of the casual labour is of poor quality and having but little interest in their work, it can be said that steady and positive progress is being achieved.

Talks and demonstrations with exhibition material on the subject of food hygiene have, on a number of occasions, been given to groups and at meetings of various organisations, to food handlers and to other interested bodies; in this connection the collection of useful film strips and other visual aids, which have been built up in the Health Education section of the Department over the last few years, have proved invaluable.

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

Bakers and Bakers' Shops		39
Breweries		1
Butchers		42
Confectioners (other than flour confection	ns)	91
Dairies		8
Delicatessen and Sandwich Shops		12
Fish and Fried Fish		32
Fruiterers and Greengrocers		74
Grocers, Provision and General Stores		144
Ice Cream Manufacturers		11
Premises where Ice Cream is sold		157
Ice Cream Store		1
Meat Products Factories		4
Public Houses and Hotels with open bars		56
Restaurants, Cafes and Snack Bars		125
Slaughterhouse		1
Wholesale Manufacturers or Suppliers		7

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 totalled 60, comprising:

Butchers' Shops	 	34
Grocers and Provision Stores	 	18
Fried Fish Shops	 	7
Potato Crisps Manufacturer	 	1

Visits and inspections made to food premises, classified as to type, were:

Dairies and Milk Distributors	 	297
Ice Cream Manufacturers	 	188

Ice Cream Retailers			74	309
Bakehouses				49
Butchers' Shops and	Wholesale	Depots		254
Meat Products Prepar	ation Pres	mises		68
Fish Shops				139
Fried Fish Shops				45
Other Food Shops an	d Stores			427
Hotel and Restaurant	Kitchens			811
Slaughterhouses				597
Food Samples taken				602
Visits in connection w	vith Unfit	Food		255

Slaughtering and Inspection of Food Animals

There is only one large wholesale slaughterhouse in the Borough. The number of food animals slaughtered therein during the year under review exceeded by roughly one thousand the previous highest figure, the total being 21,205.

The results of the Ministry of Agriculture, Fisheries and Food's Tuberculosis Eradication Scheme in south-east England are now being noticed in the fall in the percentage of cattle including cows affected with tuberculosis. In most cases where this disease was found, in the 8 per cent. of cows slaughtered, those animals had been sent for slaughter by the Veterinary Officers under the "Slaughter of Reactors Order", the animals having failed to satisfy the tuberculin test.

Meat inspection ranks high among the duties of the Public Health Inspector as careful inspection of all food animals slaughtered is necessary to prevent the transmission to man of animal diseases and notwithstanding the fact that full inspection involved a considerable amount of evening and week-end work, a 100 per cent. inspection of all food animals immediately after slaughter was maintained.

It will be noted from the accompanying table that the cases of cysticercus bovis (tape worm cysts) discovered in animal carcases has risen to 9. This is 2 higher than in the previous year. Cold storage precautions were advised in all cases and these precautions were taken.

In addition to the normal meat inspection, 2,104 pigs were weighed and certified dead weight on behalf of the Ministry of Agriculture, Fisheries and Food Fatstock Guarantee Scheme.

The passing of the Slaughter of Animals Act, 1958, in December, and the coming into operation of parts of the Slaughter of Animals (Prevention of Cruelty) Regulations, 1958, and the Slaughterhouse (Hygiene) Regulations, 1958, on the 1st January, 1959, gave promise of many necessary improvements in the construction and maintenance of slaughterhouses.

Carcases and Offal Inspected and Condemned in Whole or in Part

	Cattle excluding Cows	Cows	Calves	Sheep and Lambs	Pigs	Horses
Number killed	2,406	671	3,114	6,518	8,496	_
Number inspected	2,406	671	3,114	6,518	8,496	-
All diseases except Tuber- culosis and Cysticerci: Whole carcases condemned	_	6	1	18	22	_
Carcases of which some part or organ was condemned	742	357	12	571	550	_
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	30.8	54·1	·41	9.0	6.7	_
Tuberculosis only: Whole carcases condemned	_	_	_	_	_	_
Carcases of which some part or organ was condemned	47	54	2	_	33	_
Percentage of the number inspected affected with tuberculosis	1.9	8.0	.06	_	-39	
Cysticercosis: Carcases of which some part or organ was condemned	9		_			
Carcases submitted to treatment by refrigeration	9	_	_			
Generalised and totally comdemned	_	-	_			

Milk and Dairies Regulations

Eastbourne is a specified area within the meaning of the Milk (Special Designation) (Specified Areas) Order, 1955, and therefore all milk sold in the town must comply with the conditions for treatment and handling prescribed by the regulations for milk sold under the Milk (Special Designation) Regulations. 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)	 	 97

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	design	ation	
						82
Dealers' Licences			the	design	ation	
"Sterilised"						29
Dealers' Licences			the	design	ation	
"Tuberculin Test	ted'	,				39

(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

Seventeen samples were submitted for analysis, of which four 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.

	Milk Fat	Milk Solids other than Milk Fat
Average for the year	3.65	8.78
Richest Sample (October) (excluding Channel Island Milk)	3.78	9.03
Poorest Sample (June)	3.30	8.70
Average of Channel Island Milks	4.58	9.01
Requirements of the Sale of Milk Regulations	3.00	8.50
Requirements of the (Channel Island) Milk Regulations	4.00	8.50

CI CACIL	No. of			Number of Samples			
Class of Milk	Samples Tested	Appropriate Tests	Passed	Failed	Void		
Pasteurised	95	Phosphatase Methylene Blue	95 92	_	<u>-</u> 3*		
Tuberculin Tested	41	Phosphatase	41	_	_		
(Pasteurised)		Methylene Blue	41	_	-		
Tuberculin Tested (Farm Bottled Milk)	43	Methylene Blue	33	10	-		
Sterilised	12	Turbidity Test	12	_	_		

^{*} Note—On days when the atmospheric shade temperature exceeds 65°F. the Methylene Blue Test is recorded as void.

Reports on the ten 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 on arrival at the dairy and of farm-bottled milk are taken on a rota system during 48 weeks of the year.

Of the 72 samples taken 71 proved to be negative. In one case the guinea pig inoculated with the milk died 17 days after the injection, the result therefore being void.

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
	For the Sale of Ice Cream			157
	For storage of Ice Cream for	the	purpose	1

Visits and inspections of these premises totalled 497; 188 being to manufacturers' premises and 309 to retailers.

(b) BACTERIOLOGICAL EXAMINATION

Two hundred and forty-nine samples were taken. The bacteriologist classified them in the grades indicated below:

Grade 1			 159 210
Grade 2 Grade 3			 31)
Grade 4			 24 39
Grade 1	* *	***	 13)

84.3 per cent. of the samples taken fell into Grades 1 and 2.

Samples placed in Grades 1 and 2 are considered to be satisfactory, but where the sample falls into Grades 3 or 4 the indications are that there is a falling-off in the standard of production hygiene or in the handling of the product. Faults are sometimes found on follow-up inspection. Some of the poor grading was probably due to considerable building extension at one factory.

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:

Anchovy Paste (ca	ns)		20,000	Jam and Marmalae	de (lbs.)	 10
Biscuits (lbs.)			12	Meat and Offal (lb		 900
Butter and Margar)	302	Meat Products (lbs	s.)	 201
Cake (lbs.)			36	Meat (4 lb. and les		 149
Cakeoma Mixture	(pkts.)		2	Meat (over 4 lb. ca		 97
Cereal (pkts.)			9	Melons		 4
Cheese (lbs.)			221	Milk (cans)		60
Cheese (cartons)			38	Mushrooms (lbs.)		 21
Chocolate (lbs.)			1	Oats, rolled (lbs.)		 16
Chocolate Rolls			4	Pickle (jars)		 1
Cockles (jars)			60	D 1. /		31
Coconut (pkts.)			15	Poultry (lbs.)		 36
Cordials (botts.)			1	Potatoes (lbs.)		 1,979
Cream (cans)			3	Prawns (lbs.)		20
Dates (pkts.)			12	Sauce (botts.)		72
Eggs, liquid (lbs.)			44	Sausages and Sausa		
Fish (stone)			115%	Sausages (cans)	~	 1
Fish (cans)			234	Soup (cans)		29
Fruit (cans)			197	Sponge Mixture (2
Fruit (lbs.)			171	Suet (pkts.)		 17
Fruit, dried (lbs.)			46	Tea (lbs.)		 1
Ham (lbs.)			1,6551	Vegetables (cans)		 423
()			-,0004	regermores (emis)	Of the second	

Two hundred and fifty-five 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

Eighty-nine formal and 62 informal samples were submitted to the Public Analyst, of which three formal and three informal samples were found to be unsatisfactory.

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

Sample No. 945—Marmalade (Informal)

Deficient in soluble solids 5.1 per cent.

Sample No. 946—Blackcurrant Jelly (Informal)

Deficient in soluble solids 11.6 per cent.

These two samples were home-made, only a small quantity of which was put on sale. The deficiency was explained to the maker and adjustments made in the recipes for future use.

SAMPLE No. 576—Paper Handkerchiefs in Flour (Informal)

Case investigated in co-operation with manufacturers of the flour. It would appear that there was a manufacturer's fault in the paper bag and to stop the leak, when the bag was filled, two paper handkerchiefs were pushed into the hole. The damaged bag should have been rejected further along the line, but it was inadvertently packed for retail sale.

Sample No. 141—Pork Sausages (Formal)

Meat content 63.5 per cent.

Sample No. 142—Pork Sausages (Formal)

Meat content 64.0 per cent.

The meat content of these two samples was marginally below the accepted standard. The attention of the vendors was drawn to this deficiency by letter.

Sample No. 422—Mincemeat (Formal)

Fat content only 2.10 per cent. Mincemeat should contain at least 2½ per cent. of suet or equivalent fat.

The Public Analyst suggested that the quantity of mincemeat submitted as a sample was insufficient to enable him adequately to assess the fat content of a whole jar. A further formal sample was therefore taken comprising three whole jars of the same branded product and on analysis this gave a fat content of 3 per cent. No further action taken.

Action taken in respect of Other Unsatisfactory Food

NUT TOFFEE WHICH CONTAINED A RUSTY NAIL

Vendor prosecuted. Fines £2 plus costs £5 12s. 3d.

HOUSING

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

Dwelling	Houses	(Housing Act)		 285
Dwelling	Houses	(Public Health	Act)	 148
Revisits				 372

Clearance Areas and Unfit Houses

Two further small Clearance Areas were dealt with during 1958, comprising eight and nine houses respectively. A short Public Enquiry was held in connection with the larger area, but all objections were withdrawn. The orders were subsequently confirmed, but the tenants not yet rehoused.

The remaining twelve houses in the Leslie Street area were demolished and preparations made for building two large blocks of flats on the cleared site.

Four individual unfit houses were closed as demolition was not practicable and Demolition Orders made in respect of three houses. Two further unfit houses were reported upon in December and Demolition Orders made subsequently.

Part of one house was closed, the two roons being incapable of being made fit.

Since the war ninety-nine houses have been dealt with in ten Clearance Areas, ten individual houses demolished and fourteen closed.

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 1958.

Houses in Clearance Areas and Unfit Houses Elsewhere A—Houses Demolished

	The state of the s		LACED g period	
	DEMOLISHED	Persons	Families	
IN CLEARANCE AREAS (1) Houses unfit for hunan habitation	15	-	_	
bad arrangement, etc	_	_	-	
(3) Houses on land acquired under Section 43 (2) Housing Act, 1957 NOT IN CLEARANCE AREAS (4) As a result of formal or	-	-	_	
informal procedure under Section 17 (1) Housing Act, 1957	-	16	5	
certified unfit by the Medical Officer of Health	_	_	_	
(6) Houses unfit for human habitation where action has				
been taken under local Acts		_		
(7) Unfit houses included in Unfitness Orders	- "	_	_	
B—Unfit Houses Closed (8) Under Sections 16 (4), 17 (1)	Number	-		
and 35 (1), Housing Act,	2	11	3	
(9) Under Sections 17 (3) and 26, Housing Act, 1957	_	-		
(10) Parts of buildings closed under Section 18, Housing Act, 1957	1	3	1	

C—Unfit Houses Made Fit and Houses in which Defects were Remedied

	By Owner	By Local Authority
(11) After informal action by Local Authority	86	_
(12) After formal notice under (a) Public Health Acts (b) Sections 9 and 16, Housing	8	-
Act, 1957	_	_
(13) Under Section 24, Housing Act, 1957	_	-

D-Unfit Houses in Temporary Use (Housing Act, 1957)

Desirion at and of maried		Number of houses (1)	Number of separate dwellings contained in column (1) (2)
Position at end of period			-
(14) Retained for temporary accommodati		and the same	
(a) Under Section 48			_
(b) Under Section 17 (2)		1	1
(c) Under Section 46		_	_
(15) Licensed for temporary occupation	on under	Terror Mary	-
Sections 34 or 53		_	-

Housing Act, 1949—Improvement Grants

Sixty-one applications for improvement grants were considered, one of which was not proceeded with. Fifty-eight applications were approved, one not approved and one deferred.

With two exceptions the applications were for the installation of a bathroom, together with a hot-water system and internal water closet.

Thirteen grants were made to owners for work for the benefit of tenants and forty-three were to owner-occupiers.

The other applications were for the improvement of a block at an old people's home and for the conversion of a coach house into a dwellinghouse.

It is unfortunate that more owners of rented properties do not take advantage of the Improvement Grant facilities as there are still so many smaller properties which have not what is now largely deemed to be a reasonable necessity in the home, namely, a bathroom and a domestic hot-water service. Fortunately we have no individual houses which have not a separate water closet and with few exceptions the water closet is within or adjacent to the house.

Rent Act, 1957—Certificates of Disrepair

The main effect of this Act on the Department has been in connection with the large number of enquiries by tenants as to the effect that an application would have both on their relationship with their landlord, and on the postponement of a rent increase. The number of actual applications has been small in comparison, but the amount of work involved has been considerable.

It would appear that many tenants feel that a reasonable increase in their rents is, in the circumstances, justifiable, and by and large it is obvious that many landlords, now that they have a reasonable rental income, are spending money on maintaining their properties.

Applications, etc., dealt with were:

Applications for certificates		16
Decisions not to issue certificates		2
Decisions to issue certificates		14
Undertakings given by landlords under pa	ra-	
graph 5 of the First Schedule		7
Certificates issued		8
Applications by landlords for cancellation	of	
certificates		10
Objections by tenants to cancellation	of	
certificates		1
Certificates cancelled		9

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, 1958	1,457
Number of families housed in requisitioned	
properties	42
Number of family units rehoused during 1958	267
Number of houses and flats built by the	
Council in 1958	153

GENERAL INSPECTIONS FOR PUBLIC HEALTH PURPOSES

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

Complaints	investig	gated	 	753
Schools			 	51

Camping Sites and Moveable Dwellings	 148
Places of Public Entertainment	 12
Public Baths	 127
Drainage and Plumbing Works	 1,070
Land Charges Enquiries	 505
Stables and Piggeries	 72
Smoke Observations	 247
Factories	 330
Workplaces	 32
Outworkers' Premises	 11
Shops (Section 38, Shops Act, 1950)	 127
Departmental Properties	 219
Revisits	 802
Infectious Disease Investigations	 7
Miscellaneous Visits	 1,284

Statutory Notices under the Public Health Act, 1936

Most owners of property comply with the requirements of informal notices, but there are occasions when it is necessary to serve formal notices. The following formal notices were served:

Section 39—To repair drainage	. 1
Section 75—To provide dustbins	. 8
Section 93—To abate nuisances	 . 4

The necessary works were put in hand by the person on whom the notice was served and there was no necessity for action before the justices.

Moveable Dwellings and Camping Sites

Applications were received as follows:

For licences to use land as a site for moveal	ble	
dwellings (during the season only)		2
For licences to station individual caravans		4

There is one large residential caravan site in the Borough, part of which extends into the adjoining Rural District of Hailsham. Thirty of the caravans are within the Borough. All sanitary facilities are provided.

One large modern caravan site with a high standard of amenities has been constructed, for use during the holiday season only, comprising 200 caravans. This site was in operation during the summer.

Shops Act

One hundred and twenty-seven inspections of shops were carried out in connection with the health and welfare provisions of the Shops Act, 1950. The general standard of hygiene and cleanliness was good.

Schools

Most of the schools under the control of the Local Authority now have their own kitchen. The central kitchen, from which a container service to other schools was maintained, has now been put out of use. This changeover has meant that the kitchens are now widespread, but the Inspectors have found that a good standard of food hygiene is kept up.

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

Six applications for licences to keep pet shops were received during the year, all of which were granted.

Clean Air Act, 1956

The remaining provisions of this Act together with the Dark Smoke (Permitted Periods) Regulations, came into force on the 1st June.

The Council had already amended its Building Byelaws to include the provision that all fireplaces in new buildings should be so designed as to be suitable for burning smokeless fuels.

Reports were submitted to the Council on the general subject of the Clean Air Act provisions and it was felt that having regard to the total absence of polluted atmospheric fog and general climatic conditions which give at least some wind on most days, little or no purpose would be served at the present time by the Council attempting to make a smoke control order for any part of the Borough.

During the period of press publicity on the subject of the Clean Air Act, many complaints were received alleging the emission of dark smoke, but on investigation it was found that, in almost all of the cases, no offence was committed, nevertheless the chimneys of some sixteen large furnaces were under observation from time to time for varying periods and much informal educative work done in the boiler houses.

The field of Health Education embraces air pollution and more emphasis will be laid on this subject in an endeavour to bring home to to the householder the advantages of a substantial reduction in the amount of domestic smoke discharged to the atmosphere during the colder months.

Factories Acts, 1937 and 1948

1—Inspections for purposes of provisions as to health

Premises	Number	Number of			
Fremises	on Register	Inspections	Written Notices	Occupiers Prosecuted	
(i) Factories in which Sections 1, 2, 3, 4, and 6 are to be enforced by Local Authorities	77	85	-	_	
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	237	205	5		
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding			-		
out-workers' premises)	115	40	2	_	
TOTAL	429	330	7	_	

2—Cases in which defects were found

	Number of cases in which defects were found				Number of cases in	
	Found	Remedied	Referred		which prosecu-	
	Founa		To H.M.	By H.M. Inspector	tions were instituted	
Want of cleanliness (S.1)	6	6	-	_	_	
Overcrowding (S.2)	-	_	_	_	_	
Unreasonable temperature (S.3)	_	_	_		_	
Inadequate ventilation (S.4)	_	_		_	_	
Ineffective drainage of floors (S.6)	_	-	_	_	_	
Sanitary Conveniences (S.7) (a) Insufficient	3	3	_	_	_	
(b) Unsuitable or defective	11	11	_	_	_	
(c) Not separate for sexes	_	_	_	_	_	
Other offences against the Act (not including offences relating to Outwork)	1	1	_	_	_	
TOTAL	21	21	-	-	-	

Part VII of the Act-Outwork

SECTIONS 110 AND 111

		Section 110	
Class of Work	No. of Out- Workrs in August list required by Section 110 (1) (c)	No. of cases of default in sending lists to the Council	No. of prosecutions for failure to supply lists
(1) Making, altering, etc., of wearing apparel	38	_	_
(2) Making, finishing and repair of linens	1	_	_
(3) Making, mending or finishing lace and lace curtains.	3	_	_
(4) Making curtains and hangings	3	_	-
(5) Cabinet and furniture making and upholstery work	2	_	
(14) Making or repairing umbrellas and sunshades	1	_	_
(31) Making of lampshades	1	_	-
TOTAL	49	-	_

SECTION 111

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

RODENT CONTROL

(a) Surface Control

The Council provides a free service for the destruction of rats and mice in private dwellings and makes a charge for this service in business and other premises.

As required by the Prevention of Damage by Pests Act, 1949, the two rodent operatives continued with the survey of premises and dealt with rats and mice as found, as well as dealing with those reported by occupiers of premises.

A summary of the visits made and action taken shows the extent of this work.

		Type of Property			
		Local Authority	Dwelling Houses	Business	Total
Number: Inspected on Complaint		9	194	17	220
Inspected on Survey or vestigation	In-	110	527	297	934
Found to be infested by: Rats (a) Major		2	2	1	5
(b) Minor		4	147	7	158
Mice (a) Major		7	7	19	33
(b) Minor		10	162	16	188
Treated by Operators		23	318	43	384
Visits for all purposes		359	3,901	741	5,001

Number of block control schemes carried out-22.

(b) Sewer Baiting

A test baiting of 10 per cent. of all sewer manholes was carried out in May and on the result of this test the maintenance treatment of sewers was planned for May and November.

The results of these half-yearly sewer baitings indicate a considerable decrease in the number of rats in the sewers, so much so that it was found possible drastically to reduce the number of manholes baited in the treatment from 387 in November 1957 to 135 in 1958, with a valuable saving in time and costs.

Sewers are now baited with Warfarin in oatmeal with an added mould inhibitor and a longer period of time is allowed between the three days on which bait is deposited; the rats have therefore a longer time in which to find and feed on the bait. A lethal bait is laid on each of the three days when required, but it is sometimes not necessary to bait on the third day as the earlier baits are undisturbed through the absence of rats in the vicinity of the manhole.

	November 1957	May 1958	November 1958
Manholes baited	387	292	135
Heavy infestation (complete clearance of baits)	160	51	. 37
Moderate to light infesta- tion (partial take of bait)	40	25	5
No evidence of rats (baits not touched)	187	216	93

SECTION F

MISCELLANEOUS

Nursing Homes

Nursing Agencies

Nurseries and Child Minders

Children Act, 1948

National Society for the Prevention of Cruelty to Children

Staff Medical Examinations

Midwives Act, 1951

Meteorology

Public Health Act, 1936—Section 187 NURSING HOMES

No changes in registration particulars were reported other than a transfer of registration in respect of Manor Hall Nursing Home, and at the end of the year twelve Nursing Homes provided an approximate total of 140 beds for chronic, medical and surgical patients.

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

Nurses Agencies Act, 1957

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.

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

Once again 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.

Classification	Cases		Total			
Neglect Advice sought	 11 6	0-2 8 2	2–5 9 3	5-15 10 4	16–17 2 –	29 9
	17	10	12	14	2	38

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

Neglect	 	 	40
Beyond Control	 	 	3
Moral Danger	 	 	4
Advice Sought	 1.5	 	23
			70

These cases involved 169 children, of whom 103 were boys and 66 girls.

The number of visits made in connection with cases reported by Public Health Officers was 125.

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 1958 the examinations were:

New appoint Sick pay	•	 	201 56
			257

In addition to the above, eleven examinations were carried out on candidates for admission to training colleges.

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-five midwives notified their intention to practise, of whom four were in the Local Health Authority's Domiciliary Midwifery Service, and thirty-one were employed in the Hospital Service. One midwife notified her intention to act as maternity nurse.

METEOROLOGY

Borough Meteorologist: W. L. PECK

Sunshine

The total of 1593.4 hours placed Eastbourne eleventh in the official list of 334 stations. This total was the lowest recorded since 1889, and sunshine was below average for every month of the year with the exception of April.

Temperature

Day temperatures were mainly below average including all the summer months with the exception of September. The only other months above average were February, October and December. Night temperatures, however, were slightly above average on the whole, only five months being below average, including June and July.

Sea Temperature

Apart from March, May, July and August, all other months were above average.

Rainfall

The total of 37·18 inches was the highest recorded since 1935, and 5·93 inches above the 60-year average. Eight months of the year were above average, including all the summer months with the exception of July.

Summary of Observ	ations				
AIR PRESSURE: (Mean	n Sea L	evel)			
Daily Average		- 1			
9 a.m					30-000 inches
9 p.m					29.992 ,,
AIR TEMPERATURE:					
Daily Average					
Maximum					55.4 degrees
Minimum					46.1 ,,
Combined					50.8 ,,
Range					9.3 ,,
At 9 a.m.					51.3 ,,
At 9 p.m.					50.3 ,,
Warmest Day—9t	h July				74 ,,
Warmest Nights {	28th A	ugust	. , }		63
C-11 D 22	5th and	oth Sej	ptember J		,,
Coldest Day—22n	d Janua	ary	>		34 ,,
Coldest Nights 2	th and	12th Ma	rch }		25 ,,
The second secon		12111 1718	iicii)		
EARTH TEMPERATURES	:				
Daily Averages					FO (1
At 1 foot					52.6 degrees
At 4 feet					53.6 ,,
SUNSHINE:					
Total					1593.4 hours
Daily Average					4.37 ,,
RAINFALL:					
Total					37·18 inches
"Rain" days					170

HUMIDITY:					
Daily Averages					05
9 a.m					85 per cent.
9 p.m				* *	87 ,,
WINDS:					
Percentage of 9 a.	m. and	9 p.m. o	bservations		
Direction				P	ercentage
N					11.78
N.E					4.66
E					7.40
S.E					7.40
S					9·18 9·86
S.W. W					27-12
N.W.	**				17.67
Calm		• • •	**		4.93
	West		1.1		
Prevailing Winds-	West.				

Snow and Sleet recorded on	 	13 days
Thunderstorms recorded on	 	15 ,,
Fog (9 a.m) recorded on	 	6 ,,
Gales recorded on	 	2 ,,
Air Frost recorded on	 	31 "
Ground Frost recorded during	 	42 nights

Sunshine

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

ist were.		
Position	Town	Total Hours
1	Shanklin	1700-5
2	Sandown	1636-6
3	Margate	1623-2
4	Ventnor Park	1615-2
5	Littlehampton	1612-6
6	Weymouth	1608-3
8	Worthing	1601.5
9	Swanage	1599.7
10	Bournemouth	1597-1
11	Eastbourne	1593.4
14	Ramsgate	1571.8
15	Hayling Island	1563.0
17	Dover	1549-3
18	Bognor Regis	1549.0
21	Torquay	1532.4
22	Poole	1531.7
23	Folkstone	1531-2
24	Penzance	1524-9
25	Brighton	1519.4
26	Southsea	1515-2
27	Falmouth	1513-3
28	Seaford	1510.9
30	Hastings	1508-4
36	Scilly Isles	1484.7
43	Bexhill	1463.0
. 70	Plymouth	1409.5
80	Teignmouth	1392-5
117	Paignton	1339-6

Averages: 60 Years. 1888 to 1941 and 1947 to 1952

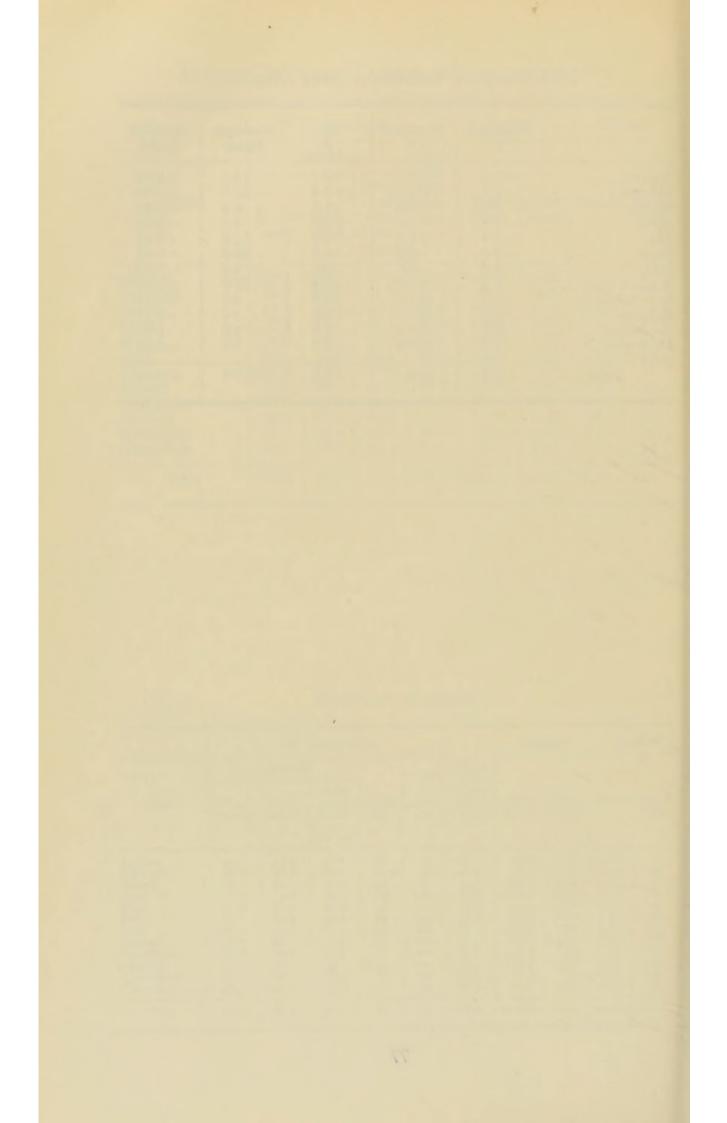
	- Air	Air Temperature			Sunshine		Rainfall	
	1	Means of						
Month	Maxi- mum	Mini- mum	Max. and Min. Com- bined	Sea Tem- pera- ture	Total Hours	Daily Hours	Inches	'Rain' Days
January	2 2 2	37.2	41.2	42-4	62.0	2.00	2.96	17
February .		36.5	41.0	41.2	83.7	2.99	2.29	14
March		38.1	43.1	42.8	137.0	4.42	2.26	14
April		41.4	47-1	46.8	179.1	5.97	1.97	13
May		46.9	53.0	52.8	234.9	7.58	1.64	11
June		52.2	58-1	58.6	238.0	7.93	1.77	10
July		55.9	61.6	62.5	236.3	7.62	2.20	11
August		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	4.95	31.25	165

MONTHLY AVERAGES

		Air '	Temperat	ure			Sunshine		Rainfall	
Month Maxi- mum Mini- mum Mini. Com- bined Max. High- est		Means of	f			Mean Sea				
	Low- est	Tem- pera- ture	Total Hours	Daily Hours	Inches	'Rain' Days				
January February March April May June July August September October November December	45.0 47.7 45.2 51.2 57.6 62.1 66.0 66.0 66.2 59.2 50.6 48.3	37.1 38.3 36.1 39.6 48.2 52.0 55.8 57.3 56.8 50.2 42.1 39.4	41.1 43.0 40.7 45.4 52.9 57.1 60.9 61.7 61.5 54.7 46.3 43.9	53 54 56 64 68 69 74 73 73 63 58 53	25 30 25 31 41 44 48 52 49 42 33 30	43.1 43.6 41.6 50.1 52.7 58.8 62.0 63.3 63.1 57.7 50.8 46.5	48.7 50.0 130.6 186.0 202.5 199.5 226.8 136.7 172.9 116.7 70.2 52.8	1.57 1.79 4.21 6.20 6.53 6.65 7.32 4.41 5.76 3.76 2.34 1.70	4.15 3.22 1.83 1.17 2.45 3.62 1.80 4.37 3.56 4.24 2.46 4.31	15 13 11 14 16 15 21 10 15 9
YEAR	55-4	46.1	50.8	74	25	52.8	1593-4	4-37	37.18	170

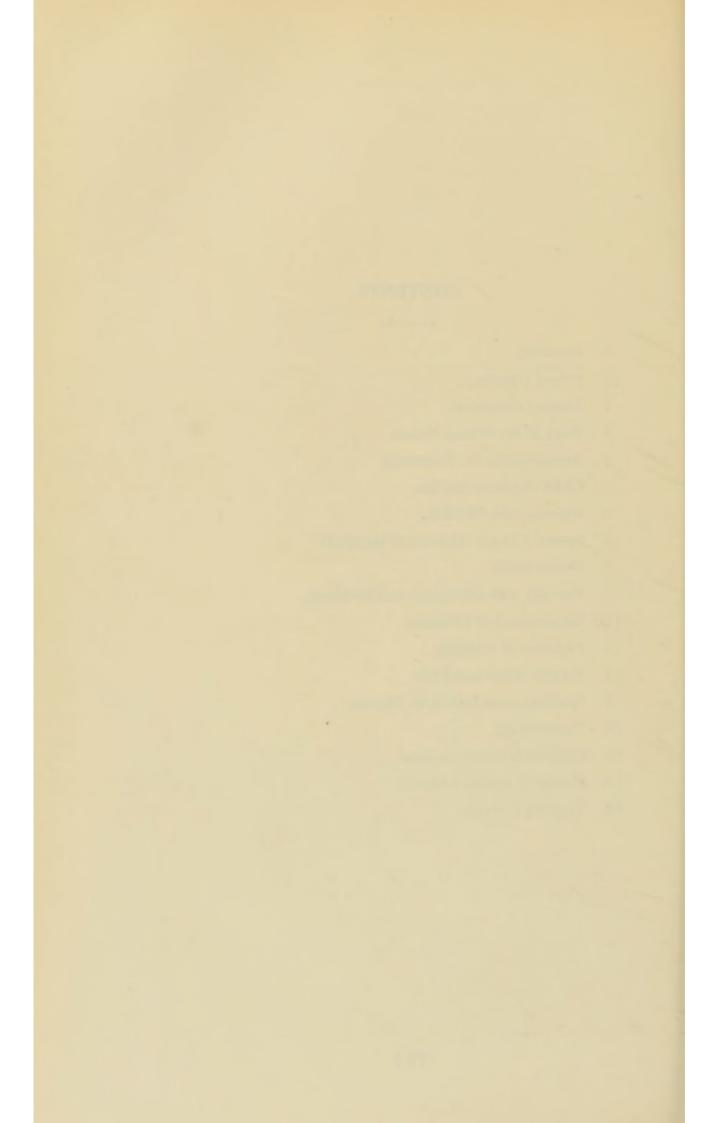
1958 Monthly Variations from Averages

	Maximum °F.	Minimum °F.	Sea °F.	Sunshine Hours	Rainfall Inches
January February March	 -0·2 +2·3 -3·0 -1·7 -1·4 -2·0 -1·2 -1·6 +1·5 +1·2 -0·7 +1·4	$ \begin{array}{r} -0.1 \\ +1.8 \\ -2.0 \\ -1.8 \\ +1.3 \\ -0.2 \\ -0.1 \\ +1.0 \\ +3.9 \\ +3.0 \\ +0.2 \\ +0.8 \\ -0.7 \end{array} $	$ \begin{array}{r} +0.7 \\ +2.4 \\ -1.2 \\ +3.3 \\ -0.1 \\ +0.2 \\ -0.5 \\ -0.4 \\ +1.9 \\ +2.0 \\ +1.0 \\ +1.3 \\ \hline \end{array} $	$ \begin{array}{r} -13.3 \\ -33.7 \\ -6.4 \\ +6.9 \\ -32.4 \\ -38.5 \\ -9.5 \\ -82.0 \\ -0.7 \\ -4.7 \\ -2.0 \\ -1.4 \end{array} $	+1·19 +0·93 -0·43 -0·80 +0·81 +1·85 -0·40 +1·81 +1·16 +0·33 -1·38 +0·86



CONTENTS

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



SCHOOL HEALTH SERVICE

School Health Department Avenue House Eastbourne

To the Chairman and Members of the Education Committee

LADIES AND GENTLEMEN,

Last year I had great pleasure in presenting the fiftieth Annual Report on the School Health Service in Eastbourne. In contrast with the formidable array of achievements over the space of fifty years, the advances in the Service during the past year may appear less dramatic, but advances there have been. I, therefore, present the fifty-first report with confidence that in all aspects of the day-to-day work of the School Health Service much has been improved and much has been done.

The change of emphasis on the priorities of the School Health Service must surely be of particular interest to Education Committees. Theirs was the task in the early days of providing medical and auxiliary services for treatment of the schoolchild not otherwise available and without which the child would be seriously impeded from benefiting from the education provided. With the fruits of health education now being harvested in the form of a markedly lower incidence of child illness and disability and an ever more adequate National Health Service to deal with that which remains, the prime emphasis is now on health education of the child and parents, a responsibility much more closely related to the essential function of an Education Committee. In co-operation with the Chief Education Officer and Head Teachers, I look forward to expanding Health Education in schools, and one may hope that this vital subject will assume an increasing importance in programmes of Further Education.

There are, however, important specialised clinical functions particularly related to the handicapped child and also concerned with assisting the more normal child to fit into the school environment which remain the prime responsibility of the School Health Service and which are in no way duplicated by the provisions of any part of the National Health Service. In this connection, the Downs School continues to perform a magnificent work in helping physically-handicapped and delicate children to cope with their difficulties and to receive the individual help and attention, which is so necessary in their education. Swallow's Nest School, too, is finding its rightful place in the sphere of specialised educational help for the backward child, and I am happy to note much less mistrust on the part of parents during the past year when their child was recommended for admission to the school. In connection with both schools, I should like to acknowledge with thanks the remedial work which is carried out so excellently by

Chelsea College; work which requires great patience and understanding. Each child receives individual exercises and looks forward to his visit to the College.

A child in an ordinary school may be handicapped by a visual or hearing defect and be labelled as backward. It will be noted that vision testing is now being carried out annually in all schools and this new procedure will pick up those children with visual defects arising between the periodic main inspections. More and more emphasis is now laid on the importance of the early detection of deafness and to this end increased use is being made of the department's audiometric testing apparatus. Increasing numbers of infants are also given simple hearing tests all with the object of instituting early treatment and avoiding the tragedy of the partially deaf child being labelled backward.

One of the clinical specialities in which the Regional Hospital Board has so far made no local provision is Orthodontics. In the face of a mounting waiting list of children found at routine dental inspections to require such treatment, it has now been necessary for the Council to increase its existing service in this respect.

As with dental caries, orthodontic deformities appear to be increasing in incidence. The findings of Weston Price in his world-wide studies of healthy peoples would suggest that such increases in dental disabilities may be expected to continue in the face of an ever-increasing sophistication of foodstuffs and mounting consumption of refined sugary substances.

To those responsible for the health of schoolchildren, the replacement of old schools by light and airy modern versions is always a source of satisfaction. So far as physical environment is concerned, nothing better in the country could be found than the sites and facilities provided by the Bishop Bell Secondary and Ocklynge Junior Schools opened respectively during the year.

My thanks are due to you, Mr. Chairman, and members of the Committee for your encouragement and interest in the School Health Service during the year and to the Chief Education Officer for his helpful co-operation.

I am also indebted to my Deputy, Dr. T. A. Plumley, for his conscientious work in the day-to-day administration of the Service and for his help in compiling this report. Miss B. Douch, the Senior School Health Clerk, has continued to render invaluable assistance within the Department and in relation to the many arrangements made for our activities in the Colleges and Schools.

I am, Mr. Chairman, Ladies and Gentlemen, Yours faithfully,

KENNETH VICKERY,
Principal School Medical Officer.

EDUCATION COMMITTEE

(as constituted at 31st December, 1958)

The Mayor:

Alderman J. W. G. Howlett, J.P.

Chairman:

COUNCILLOR W. P. LEBBON

Deputy Chairman:

COUNCILLOR W. E. HAFFENDEN

Aldermen:

MISS G. L. PARKER

S. M. CAFFYN

Councillors:

T. A. ALSTON

G. A. Bosley

J. B. COVENTRY

MISS M. M. M. FENWICK-OWEN

G. S. FOYLE H. INGRAM

Mrs. F. M. Llewellyn W. A. Neale

F. A. POPE C. J. H. TOLLEY

Co-opted Members: Mrs. I. A. Snell Professor H. Berry

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. (to 11.5.58)

THOMAS A. PLUMLEY, M.B., B.S., M.R.C.S., L.R.C.P., D.P.H.,

D.Obst., R.C.O.G. (from 2.6.58)

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.

Superintendent Health Visitor:

Mrs. S. M. James, S.R.N., H.V.Cert.

Health Visitors | School Nurses:

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 B. E. KEEN, S.R.N., S.C.M., H.V.Cert. (from 22.9.58)

MISS M. J. PARTRIDGE, S.R.N., S.C.M., H.V.Cert. (to 4.8.58)

Clerical Staff:

Miss B. Douch (Senior)

Mrs. C. R. Ashley (12.5.58 to 31.12.58)

MISS P. HIDE (to 12.4.58)

Miss J. Markwick

Dental Attendants:

Mrs. D. D. Stoner

MISS D. M. CLARKE (to 4.10.58)

Miss A. Bridgen (from 3.10.58)

Speech Therapist:

Mrs. K. Hansford, L.C.S.T.

(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 Asssitant:

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

Mrs. J. Barron, Clerk

CLINICS

The various Clinics were held as follows:

Special Examinations Clinics

These were held at Avenue House, Acacia Villa, Hampden Park Hall and Green Street Clinics and also at Hampden Park Secondary School and Highfield Primary School as required.

Speech Therapy

Acacia Villa ... Fridays

Tuesday and Wednesday during school Avenue House ..

terms, 9.15 a.m. and 2.15 p.m.

Weekly sessions Hampden Park Infants' School ... The Downs School Weekly sessions

.. Weekly sessions Swallow's Nest School . . Occupation Centre ... Weekly sessions . .

Child Guidance

Avenue House

Psychiatrist Thursday, 9 a.m.

Friday, 9 a.m. and 2 p.m.

Tuesday, Thursday and Friday, 9 a.m. Educational Psychologist

and 2 p.m.

Ophthalmic

Special sessions fortnightly, Friday, Princess Alice Hospital

9.30 a.m.

Dental

Daily, 9 a.m. and 2 p.m. Avenue House

Tuesday and Thursday, 9.30 a.m. Anaesthetic Sessions ...

Friday, 9 a.m. Orthodontic Sessions ...

1. STATISTICS

The number of children on the School registers on reopening in January was 6,597 and 6,638 by the end of the year. There were 872 children admitted during the year and the net increase compared with the end of 1957 was 41.

The average attendance of children for the year was 6,245, a percentage of 94.04.

TOTAL NUMBER OF CHILDREN

At Primary Schools At Secondary Schools	Grammar	Schools	3,530 2,997
At Special Schools	 		 111
Total	 		 6,638

2. SCHOOL HYGIENE

Standards of hygiene of school premises and canteens were kept under constant supervision by the medical staff and public health inspectors and subject to limitations of accommodation in certain schools, continued to be satisfactory.

3. 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 1,975. A percentage of 22.84 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	 	 1,955 (98.99	per cent.)
Unsatisfactory	 	 20	(1.01)	per cent.)

The percentage of parents who were present during the periodic medical inspections was 68.3. 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

Four hundred and seventy-one 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, 1,464 children who were noted at a previous periodic or special examination, were seen by the Medical Officers.

4. WORK OF THE SCHOOL NURSES

			Session	S
Medical Inspections	 		139	
Hygiene Inspections	 		111	
School Clinics	 		21	
Vision Testing in School	 		34	
<u> </u>				305
			Visits	
Home Visits to Sick Children	 		306	
Other School Visits	 		151	
Dental Clinics	 		132	
Minor Ailment Clinics	 		444	
				1,033
		Grand Tota	al	1,338
Personal Hygiene				

The hygiene inspections were held primarily with regard to head and general cleanliness, but the opportunity was taken to assess the general state of health of the pupils. Out of 14,020 individual examinations, 46 children were found to be infested.

Many families with problems or difficulties sought the advice of the Health Visitor/School Nurse. Details are given under Section 10.

5. ARRANGEMENTS FOR TREATMENT

Children with defects are 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				1957	1958
Total number of children	who atte	ended		781	575
Total attendances made				3,585	1,966
Total number of defects to	reated			791	577
Conditions treated were:					
Impetigo				55	25
Eye Diseases (external)				79	50
Ear Diseases				27	16
Other skin diseases (boils	s, septic	conditions,	etc.)	398	252
Miscellaneous (sprains,				232	234
		Total		791	577
				- Commence of	-

SKIN DISEASES

It is interesting that skin diseases in general have decreased, especially in the case of impetigo, the incidence of which is half that for 1957, despite the hard core of children from problem families.

As few plantar warts were found during the visits of school nurses to secondary schools, foot inspections were discontinued towards the end of the year. The inspections were very time-consuming and encroached considerably upon school time and did not warrant the discovery of the occasional athlete's foot or plantar wart. The presence of these conditions is still actively sought during routine and other examinations.

CHIROPODY

Monthly chiropody sessions continued throughout the year. Miss M. E. Winstanley, M.Ch.S., saw 35 children, who made 72 attendances for treatment of corns, callosities and minor foot defects.

VISUAL DEFECTS

Good sight is essential for a child to benefit to the maximum degree from education. A system of annual vision testing of all children aged from 5 to 15 years, using Snellens Eye Card or "E" cards, was instituted during the latter half of 1958. It is hoped that by this innovation one of several defects, which has in the past caused backwardness in the school work, will be removed.

	New	Cases	Old Cases	
	1957	1958	1957	1958
Number of cases referred to Ophthalmic	2			
Clinic	173	146	273	337
Number of attendances made	215	184	300	370
Glasses prescribed	121	80	172	145

On 196 occasions the school doctor referred children to the Executive Council for repair or replacement of broken glasses under the National Health Service. In fifteen cases the applications were refused, as it was felt that undue negligence had been shown and the cost of these (f,16,10s,8d.) 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 385 school leavers examined eighteen had a history of previous otitis media and one had defective hearing.

As in the case of a visual defect, deafness can severely retard schooling and great attention is being paid to testing every child's hearing at routine medicals. The class teachers, who may be the first person to suspect a hearing defect, are becoming more aware of its effect upon a child's education and are co-operating well in bringing such a child forward. It is hoped that in the near future routine audiometric testing will be carried out on all school children. At present the audiometer is used almost entirely for children needing a more delicate form of test, who have failed the initial test carried out by the School Medical Officer. A start has, however, already been made in the case of the Downs School where all the pupils have had an audiometric test.

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.

	10-Year					
	Entrants	Old	Leavers	Others		Total
Number examined .		727	546	186	=	1,975
Previous tonsillectomy	y					
number	. 29	179	158	47	=	413
Percentage	. 5.62	24.62	28.94	25.27	=	20.91

The percentage of all children with a previous history of tonsillectomy shows a reduction compared with the figure for 1957 which was 24.13 per cent.

ORTHOPAEDIC DEFECTS

Children suffering from significant defects continue to be referred to the hospital orthopaedic department for advice and treatment.

Deformities of the adolescent girl's foot are the constant concern of School Medical Officers and School Nurses. The teenager has the burning desire to keep up with her next-door neighbour in the classroom, especially in fashion. This invariably means her falling into bad company in the choice of shoes. The teaching of foot health is virtually useless without the support of parents, bewildered by the many exotic but often agonisingly painful shoes on the market and the importunity of their increasingly fashion-conscious daughters.

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

Foot exercises

Total number of children who attended Total number of attendances made	 41	
Breathing exercises		
Total number of children who attended	 33	
Total number of attendances made	 362	
Referred to Chelsea College	 18	

This treatment clinic is additional to that 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

Colds and respiratory infections are still the main causes of absenteeism from school. Asthma continues to keep children away but new drugs, physiotherapy involving breathing and relaxation exercises, and the fostering of an optimistic outlook have gone far in helping the asthmatic child to cope with his disability and achieve a better attendance record.

REPORT OF THE SPEECH THERAPIST

The introduction of a Tape Recorder in the Speech Clinics is of great value in making an accurate assessment of speech defects, and in forming a permanent record of the children's progress.

Throughout the year, Speech Therapy Clinics were held weekly at Avenue House, Acacia Villa (Seaside), Hampden Park Infants' School, the Downs School, Swallow's Nest Day E.S.N. School and the Occupation Centre

the Occupation Cen	tre.					
					Ses	ssions Cases
Avenue House an	d Acaci	ia Villa			2	236 58
Hampden Park In	nfants' S	School				38 20
The Downs Scho	ol (inch	uding Old	Town)			34 11
Swallow's Nest D	ay E.S.	N. Schoo	1			40 23
Occupation Centr	е					34 10
					-	
					3	82 122
					-	
Number of attend	lances n	nade by c	hildren o	f schoo	l age	2,106
Number of session	ns spent	t visiting s	chools an	nd hom	es in t	he
district						43
Number of cases						
Number of attend						-
Number of attend	dances	made by	cases at t	the Oc	cupati	
Centre						307
One case over sch	ool age	made 43	attendand	ces		
Type of defect treate	d (child	ren of scho	ool age)		Cases	Discharged
Stammer					24	10
Dyslalia					38	14
Sigmatism					18	8
Delayed Speech					6	3
Spastic Speech					3	1
Deafness					4	
Cleft Palate Speed	h				3	
Other Defects					16	4
					112	40

Type of defect treated	(childre	n under	school age)		Cases	Discharged
Dyslalia					4	2
Sigmatism					1	1
Cleft Palate Speech	n				1	1
Delayed Speech					3	_
Deafness					1	_
					10	4
					_	_
Number of new ca	ses refer	rred du	ring the year			45
Number of cases u					e year	80
			KATHI FEN	HAND	SEODD	

KATHLEEN HANSFORD,

Speech Therapist.

6. CHILD GUIDANCE SERVICE

REPORT OF THE CHILD PSYCHIATRIST

This report represents the work done by the Child Guidance team on behalf of children living in the County Borough of Eastbourne. We would wish to draw attention to the fact that children in the surrounding area of East Sussex also come within the scope of the Clinic. The proportion of referrals for the current year was 75 per cent. Eastbourne cases.

Staff Changes. We have been fortunate in having a full team throughout the year.

throughout the	year.			Doris K.	SMAI	L,	
					Ps	ychia	trist.
Statistics relatin	ig to Eastl	ourne child	ren:				
Number of S	essions						132
Cases seen:							
Old						51	
New						49	
						-	100
Total number of attendances							864
New cases re	ferred du	ring 1958					73
Old cases re-							18
Cases treated	:						
By Psychia	trist					85	
By Psychol	logist					22	
						-	107
Waiting List:							
1st January,	1958						23
31st December	er, 1958						24

A. Source: School Health Service 40 . . Medical Practitioners 19 Hospitals ... 7 Other Agencies ... 91 Problems: B. Personality and Nervous Problems ... 22 Educational and Vocational Problems Delinquency 91 Analysis of cases seen during 1958: A. By Psychiatrists: Diagnosis 49 Treatment 85 Note: Eleven parents were seen by Psychiatrists. Number of attendances: 15 Analysis of Diagnostic Cases: Diagnosis and Advice 11 Treatment and Case Closed Under Treatment ... Awaiting Treatment Periodic Supervision 49 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 (including those first seen in 1958): Satisfactorily adjusted Much improved Slightly improved . . Still under treatment Withdrawn Periodic supervision 8 .. 32 Admitted to Lady Chichester Hospital ", ", Children's Home ... ", ,, Residential School ...

Analysis of cases referred and re-referred:

B. By Psychologist:

	For ascertainment	t of I.Q.				85
	Analysis of ascerta	inment co	ases:			
	Advice regardir	ng educat	ion		 33	
	Vocational guid	lance			 2	
	Personality test			**	 2	
	Maladjusted				 44	
	Attainment test	S			 4	
	Coaching cases:					
	Receiving coach	ning at er	nd of 1958	3	 9	
	Discharged dur				 9	
					-	18
C	By Psychiatric Socia	ıl Worker	:			
	Social histories					58
	Clinic interviews					442
						1
	Home and other	visits				309

7. HANDICAPPED CHILDREN

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

	1	In Residential Special Schools		In Ordinary Schools	In Hospital Schools	At Home	Total
Partially Sighted		1	_	1	_	1	3
Blind		_	_	_	-	-	-
Partially Deaf		1	2	3	_	1	7
Deaf		5	_	_	_	_	5
Delicate Physically		2	25	7	_	-	34
Handicapped Educationally		2	20	5	-	1	28
Sub-normal		1	66	_	-	1	68
Epileptic		1	_	_	_	-	1
Maladjusted		2		2	_	1	5
		15	113	18	_	5	151
				-	-	_	

EPILEPTICS

There are thirteen 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)	 	 	4
Under Section	57 (5)	 	 	1

Of the above, four children were notified as being incapable of receiving education at school, and the other child had reached the statutory school-leaving age and was reported to the Local Health Authority as requiring supervision after leaving school.

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

					Boys	Girls
Number on re	oll, Jan	uary, 1958			 39	14
Admissions					 11	7
Readmissions					 1	_
Leavers					 5	1
Number on re	oll, Dec	cember, 195	8		 46	20
The leavers	are ac	counted for	as follo	ws:		
Left the	district				 _	1
Transfer	red to I	East Sussex			 1	-
Left on r	nedical	grounds			 1	_
Reached	the star	tutory leavin	ng age		 3	_

Mr. S. Moss, Headmaster, reports:

The numbers in the school continue to rise steadily, and we are rapidly filling our classrooms to capacity. Most of the children admitted have been in the lower age range, and this is going to give us a better chance of rectifying some of the defects from which our children suffer.

We have had a very full year so far as the physical side is concerned. A number of our children competed in both the Senior and Junior Athletic meetings of the Eastbourne schools, and although we never gained a point the children showed that even when they were losing they kept on trying. All those taking part thoroughly enjoyed themselves and are looking forward to the next meetings. At the Sussex Special Schools' Sports held this year at St. Mary's School, Horam, we easily won the Junior Cup, and we were third in the Senior competition.

Seven girls and sixteen boys spent a week at the School Camp at Wannock, and although it started in a downpour of rain it finished well and was a complete success. We had the help of the students of Chelsea College and for this we are very grateful. During the week all the children walked from Wilmington to the Long Man and then back to the camp via the top of the Downs. This is no mean achievement!

Unfortunately we had to cancel our proposed trip to Holland, but we hope to be able to go on some future occasion.

Our Christmas Open Day was very enjoyable, and we were honoured with a visit from the Mayor and Mayoress.

As in past years we wish to express our thanks to Chelsea College for all the help they give so willingly.

S. Moss, L.C.P.,

Headmaster.

DOWNS SCHOOL, BEECHY AVENUE, EASTBOURNE

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

Delicate		Joined as	ionows.		26
Physically Handicapped					
					16
Partially Sighted					1
Partially Deaf			* *		1
					44
Number of admissions					-
Number of admissions					15
The children who left were p	olaced as	s follows:			
Transferred to ordinary so	hools				7
School leavers					1
Admitted to residential spe					2
Left the district				222	1
Transferred to Swallow's					1
					_
					12
The number of children on	the recei	ictor at th	a and of t	ho moon	
			e end of t		
Delicate					
Physically Handicapped					20
Partially Deaf					2
					-
					47
					_

Miss B. A. PAYNE, Head Teacher, reports:

The year 1958 opened with forty-four children on the roll. During the year numbers increased to fifty, and fell again to forty-seven. The age range was from five to fifteen years.

Two classrooms have been used by St. Mary's Infants' School throughout the year and our seniors have continued in the somewhat cramped conditions of the School Clinic.

Remedial exercises given by Chelsea students at the College have again been most beneficial, as has the weekly swimming class, when, with the help of Mr. J. Roberts and the students, each handicapped child has been able to have individual attention.

A small cookery class for the older girls has been held each week and has been very successful and popular.

At the end of the summer term the school gave a performance of "The Story of Persephone", adapted from "Demeter" by Robert Bridges. This was attended by an appreciative audience of parents and friends, as was the carol concert given just before Christmas.

A number of children attended a fireworks party kindly given by the students at the Language Tuition Centre, and others were invited to a Christmas entertainment by the students of Chelsea College.

In June, twenty-eight children went to camp at Wannock Farm, and thoroughly enjoyed the experience.

Of the twelve children who left during the year, four were transferred to junior schools, two to secondary modern schools. One to the High School, one to Swallow's Nest and one having reached school-leaving age obtained employment in the town.

B. A. PAYNE,

Headmistress.

8. SPECIAL TUITION (HOME AND HOSPITAL)

Two children had home tuition in 1958. They suffered from haemophilia and a psychiatric disorder.

Four children received education whilst in hospital special schools.

	Males	Females
Queen Mary's, Carshalton	 1	-
Goldie Leigh Hospital, Abbey Wood	 -	1
Maudsley and Bethlem, L.C.C	 1	_
Bevendean Hospital, Brighton	 1	-

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

9. DENTAL CLINIC

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER

SESSIONS

The number of sessions devoted to inspection and treatment were:

The Principal School Der	ntal Officer	 	 450
School Dental Officer			379

Of these, 45 sessions were devoted to inspections and 784 to treatment. In addition, the Orthodontic Specialist carried out 49 sessions.

GENERAL SERVICES

At the 45 sessions devoted to periodic inspections, 6,337 children were seen in the following age groups:

Number of individual children inspected during 1958:

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Total
Inspected	64	417	513	533	548	579	642	837	628	555	575	258	124	40	20	4	6,337

At the request of parents, a further 134 children were inspected at the clinic. Of the gross total of 6,471 children inspected, 2,634, a percentage of 41, were found to require treatment. The number of sessions devoted to treatment was 784, and 2,055 children made 7,132 attendances.

The following is a summary of the treatment given:

Fillings:					
Permanent teeth				 2,642	
Temporary teeth				 243	
				-	2,885
Number of teeth filled				2	
Permanent teeth					
Temporary teeth				 223	
				-	2,303
Extractions:					
Permanent teeth				 519	
Temporary teeth				 1,347	
				1 001	1,866
Administration of gene	eral anae	esthetics		 1,021	
0.1 0					
Other Operations:					
Permanent teeth				 The second second	
Temporary teeth				 716	2.024
					3,921
ORTHODONTICS					
Cases commenced	during t	he year			. 61
Cases carried forwa			year		. 77
Cases completed d					. 37
Cases discontinued					. 7
Pupils treated with	applian	ices			. 78
Removable applian	ces fitte	d			. 73
Fixed appliances fi	tted				. 28
Total attendances					1,194
Number of pupils	supplied	with artifi	cial teeth		. 24

During the year, routine dental inspections were carried out at all the schools maintained by the Authority. At those inspections, 6,337 children were examined. These, together with 134 special applications for treatment, made a total of 6,471 children seen, of whom 2,634 were found to require treatment, and 2,055 were actually treated. These routine inspections occupied 45 sessions and 833 sessions were devoted to treatment.

The general dental condition of the children in Eastbourne can be regarded as satisfactory, with now very few neglected mouths and with no significant change, compared with previous years, in the numbers referred for treatment. The older age groups in particular though, I find require constant surveillance to allow the early diagnosis of interstitial caries.

Two thousand, six hundred and forty-two fillings were inserted into permanent teeth and 243 into temporary teeth. Extractions totalled 1,866, of which 519 were permanent teeth. This figure for the number of permanent teeth extracted does not mean that all these teeth were decayed beyond repair, but included a considerable number of permanent teeth extracted for orthodontic purposes. The majority of these extractions were carried out under general anaesthesia, nitrous oxide and oxygen with the occasional additional use of a trilene vapouriser from a McKesson Anaesthesor apparatus.

Twenty-four children were fitted with artificial dentures, necessitated in most cases by traumatic injury to the front teeth, and in addition three crowns were constructed.

Radiological examinations were carried out on 271 children and 623 films were used. Having our own X-ray apparatus has proved of inestimable value, both as an aid to orthodontic diagnosis and prognosis, and also in the assessing of latent sepsis and incipient caries.

Treatment has been carried out mainly at the Avenue House Clinic, but to avoid loss of school time, conservative work was done, as in previous years, on the school premises at Highfield Primary and Langney Primary Schools.

The demand for orthodontic treatment continues to be heavy, and Mr. Norman Gray, the visiting specialist, held 49 sessions, assisted by his partner, Mr. H. G. Griffith, and the School Dental Officer, Mr. J. W. Martin. At these sessions, 100 children received orthodontic treatment and made 780 attendances. In addition, 38 children suffering from mal-occlusion of a less severe nature, received orthodontic treatment at the ordinary sessions and made 414 attendances. We are indebted to the students from the Chelsea College of Physical Education for their work at the classes for breathing exercises, held in conjunction with the weekly orthodontic clinic. These exercises play a most important part, not only in the correction of dental abnormalities, but perhaps even more essential still are their stabilising influences on the dental arches after active orthodontic treatment has been completed.

In the field of dental health education, we have, during the past year, been able, owing to a slight easing of pressure on the purely technical aspect of dental work, to devote a little more time to chair-side instruction on the main principles of oral hygiene. The completion of a course of conservative work, followed by the scaling and polishing the teeth, provides an ideal opportunity for this instruction to be given. It has been estimated, and not unreasonably I think, by many workers on caries research, that if we could persuade our patients to maintain a high degree of oral hygiene, the caries rate could be reduced by 50 per cent. In practice, it is certainly found that those patients who suffer from extensive and ever-recurring caries, always show a very poor level of oral hygiene. The toothbrush has often been blamed as an inefficient instrument, but I feel that the blame really should be placed, not on the instrument, but on its user. Properly used, and augmented with thorough mouth rinsing after all meals, the

toothbrush has still a very important part to play in the prevention of dental caries. Admittedly, there are many other factors, mainly dietetic, to contend with, but if a determined effort was made, first to reduce the consumption of sugars and carbohydrates, particularly those taken between meals, and secondly to strive to attain a high standard of oral hygiene, I feel sure that a most impressive reduction in the amount of dental caries would be recorded.

Maurice G. Berry, L.D.S., R.C.S.,

Principal School Dental Officer.

10. FAMILIES WITH DIFFICULTIES AND PROBLEMS

- (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 23 families came in this category, 9 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 17 cases involving 38 children, of whom 14 were of school age. One hundred and twenty-five visits were paid to these families. The cases were classified as:

Neglect	 	 	 11
Advice sought	 	 	 6
			17

The Inspector also dealt with 70 other families. Of the 169 children in these families, 103 were of school age.

The	classifications	were:

Neglect	 	 	 40
Beyond control	 	 	 3
Moral danger	 	 	 4
Advice sought	 	 	 23
			70
			10

(c) JUVENILE CRIME. The Chief Constable, Mr. R. W. Walker,

has kindly supplied the following statistics:

		Males	Females
Sent to Approved School		 5	-
Probation		 44	4
Convicted—conditional disch	arge	 5	-
Convicted—absolute discharg	e	 1	-
Fined		 1	-
Care of Local Authority		 1	-
Pending		 1	-
Borstal Training		 1	-
		_	_
		59	4
Cautions		 32	2
			_
		91	6
		_	-

11. EMPLOYMENT OF CHILDREN

The Department, in close co-operation with the Youth Employment Service, completed 529 medical reports during the year, 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 of school age 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:

1954	1955	1956	1957	1958
90	140	152	201	197

12. PROVISION OF CLOTHING

Education (Miscellaneous Provisions) Act, 1948, Section 5

Various articles of clothing were supplied by the Education Authority to 47 children from 31 families.

13. SCHOOL MEALS AND MILK

The year 1958 was one in which many changes took place in the Eastbourne School Meals Service. The total number of meals served during the year was 671,688 of which 24,816 were free. In 1957, 647,956 mid-day meals were served, 25,135 being free.

Four new kitchens were opened during the year, the first was at Langney Primary School in April to serve about 150 of the children of the school. At the beginning of the Autumn term the new kitchen at Ratton Secondary School was able to start serving dinners to about 500 pupils at the school. September also saw the opening of two new schools, both of which had kitchens attached. The Bishop Bell C.E. Secondary School in Langney, as well as serving about 320 dinners to its pupils, is also sending some 200 dinners to St. Andrew's Junior and Infants' Schools, and Swallow's Nest School, each day. From the other new school, Ocklynge Junior Girls' School in Victoria Drive, dinners are sent to the girls of that school who are still in the premises at Church Street as well as being served to those in the new building, making a total of about 110 each day.

The opening of these new kitchens made it possible to close the Central Kitchen in Alma Road in July. This had been functioning since February, 1947, and some of the staff had been there for many years. All were transferred to the new kitchens except the Supervisor, who obtained a similar post elsewhere. The closing of Trinity C.E. School in July included the scullery and dining-room.

In spite of these new buildings there were still a few schools with no kitchens, and existing kitchens have had to be adapted to cope with the demand. This meant that from September Hampden Park Secondary School Canteen sent meals to Stafford House School, which had moved to Whitley Road, as well as to the Hampden Park Infants' School; that the former Bedewell School Canteen catered for the pupils of Cavendish School, who in their turn had moved to the premises in Melbourne Road, and also sent dinners to Bourne Junior and Infants' Schools; and that Roselands School Canteen sent meals to St. Joseph's R.C. School. The transport arrangements had, of course, to be altered, but all the new arrangements seem to be working smoothly. Credit must be given to the staffs of the new kitchens as well as to those where changes were made for the continued smooth functioning of the Service.

The Milk in Schools Scheme has continued to function and onethird 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 day in October in 1957 and 1958.

	PRIMA	ARY AN	D SECO	ONDARY D	EPARTN	IENTS
		ME	MEALS MILK			
A day in October	No. of Children in Schools	Free	Paid	Percentage taking Meals	Total taking Milk	Percentage taking Milk
1958 1957	6,322 6,028	125 105	3,134 2,875	51.4 49.6	5,300 5,395	83.9 89.5

14. NOTIFICATION OF INFECTIOUS DISEASE

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

Scarlet Fever	 	 	 6
Whooping Cough	 	 	 1
Measles	 	 	82
Acute Pneumonia	 	 	 3

15. TUBERCULOSIS

One case of non-respiratory tuberculosis was notified in a boy 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 7 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 566 children. A total of 360 received the preliminary skin test, 21 of these being from private schools. Twenty-one (3 from private schools) gave a positive skin reaction indicating past infection. They were not vaccinated. Apart from two children who missed the appointment, these "positive" children were sent to the X-ray Unit, and their X-ray results were negative.

The remaining 339 children were vaccinated.

16. DIPHTHERIA IMMUNISATION

The number of children between the ages of five and fifteen years immunised either by the medical staff of the Department or in respect of whom records were submitted by general medical practitioners is as follows:

	Staff of the	By General Medical Practitioners	Totals
Primary Immunisation	 22	8	30
Reinforcing Doses	 423	95	518

Departmental records indicate that 6,367 out of the Registrar General's estimated population of 7,800 in this age group have been immunised, representing approximately 82 per cent.

17. DEATHS OF SCHOOLCHILDREN

I am happy to report that no deaths of schoolchildren occurred during the year.

18. 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 AND TREATMENT

RETURN FOR THE YEAR ENDED 31ST DECEMBER, 1958

Local Education Authority: EASTBOURNE C.B.

Number of pupils on registers of maintained and assisted primary and secondary schools (including nursery and special schools) in January, 1959, as in Form 7, 7 M. and 7 N. Schools 6,606

Part I

Medical Inspection of Pupils attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools)

TABLE A—PERIODIC MEDICAL INSPECTIONS

Note:—Tables A, B and C relate only to the medical inspections prescribed in the case of maintained schools 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".

Age Groups Inspected (By year of birth) No. of Pupils Inspected	No. of	SATI	SFACTORY	UNSATISFACTORY		
	No.	Percentage of Col. 2	No.	Percentage of Col. 2		
(1)	(2)	(3)	(4)	(5)	(6)	
1954 and later	16	16	100	-	-	
1953	432	429	99.31	3	.69	
1952	96	96	100	-	-	
1951	25	25	100	-	-	
1950	14	14	100	-	-	
1949	12	12	100	-	-	
1948	121	118	97.52	3	2.48	
1947	611	603	98.69	8	1.31	
1946	27	26	96.30	1	3.70	
1945	11	11	100	-	_	
1944	21	19	90.48	2	9.52	
1943 and earlier	589	586	99.49	2 3	.51	
TOTAL	1,975	1,955	98.99	20	1.01	

Table B—Pupils Found to Require Treatment at Periodic Medical Inspections

(excluding Dental Diseases and Infestation with Vermin)

Notes:—Pupils found at periodic inspections to require treatment for a defect should not be excluded from Table B by reason of the fact that they were already under treatment for that defect. Table B relates to individual pupils and not to defects. Consequently, the total in column (4) will not necessarily be the same as the sum of columns (2) and (3).

Age Groups Inspected (By year of birth) (1)	For Defective Vision (excluding Squint) (2)	For any of the other conditions recorded in Part II (3)	Total individual pupils (4)
1954 and later	1	1	2
1953	11	72	79
1952	8	19	23
1951	1	3	3
1950	2	3 3	4
1949	2	4	6
1948	15	23	34
1947	91	93	159
1946	3	2	5
1945		1	1
1944	2	4	6
1943 and earlier	110	34	131
TOTAL	246	259	453

TABLE C-OTHER INSPECTIONS

Notes:—A special inspection is one that is carried out at the special request of a parent, doctor, nurse, teacher or other person.

A re-inspection is an inspection arising out of one of the periodic medical inspections or out of a special inspection.

Number of Special Inspections	 	 471
Number of re-inspections	 	 1,464
	Total	 1,935

TABLE D-INFESTATION WITH VERMIN

Notes:—All cases of infestation, however slight, should be included in Table D. The numbers recorded at (b), (c) and (d) should relate to individual pupils, and not to instances of infestation.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons. 14,020

(b) Total number of individual pupils found to be infested
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), Education Act, 1944)
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), Education

Act, 1944)

Part II

Defects Found by Medical Inspection during the year

TABLE A-PERIODIC INSPECTIONS

Note:—All defects, including defects of pupils at Nursery and Special Schools, noted at periodic medical inspections should be included in this table, whether or not they were under treatment or observation at the time of the inspection. This table should include separately the number of pupils found to require treatment (T) and the number of pupils found to require observation (O).

Defeat					PERI	ODIC IN	SPECTIO	NS		
Defect Code No.	e Defect or Disease		Entr	ants	Lea	vers	Oth	iers	To	tal
(1)	(2)		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)
4 5	Skin Eyes:		6	20	8	17	19	31	33	68
6	a. Vision b. Squint c. Other Ears:		19 9 1	63 4 8	96 3 2	29 3 2	131 17 10	97 5 7	246 29 13	189 12 17
	a. Hearing b. Otitis Media c. Other		1 1 2 7 13	13 12 6	=	5 3	5 4	6 11 1	6 5 2 18	24 26 7
7 8 9 10	Nose and Throat Speech Lymphatic Glands Heart		3	71 27 54 8	1 - 1	9 3 6 3	10 8 - 3 4	55 10 23 16	21 3 4	135 40 77 30
11 12	Lungs Developmental: a. Hernia		6	24	1	3		26 5	11 3	53
13	b. Other		-	23	_	1	2 4 17	19 37	28	43 65
,,	a. Posture b. Feet c. Other		6 18 19	15 26	5 1 6	19 7 35	16 26	21 58	35 51	43 119
14	Nervous System: a. Epilepsy b. Other		1	-1	2	<u></u>	1	<u>-</u> 8	4	10
15	Psychological: a. Development b. Stability		1 4	6 37	=	1 6	3 6	12 44	4 10	19 87
16 17	Abdomen Other		=	6 8	-6	1 8	13	31	19	47

TABLE B-SPECIAL INSPECTIONS

Note:—All defects, including defects of pupils at Nursery and Special Schools, noted at special medical inspections should be included in this Table, whether or not they were under treatment or observation at the time of the inspection.

Defect Code					SPECIAL IN	NSPECTIONS	
No.	Defect of	or Disea	ase		Pupils requiring Treatment	Pupils requiring Observation	
(1)		(2)			(3)	(4)	
4 5	Skin Eyes:				10		
	a. Vision .				38	2	
	b. Squint .				_		
	c. Other .				2	2	
6	Ears:						
					7	1	
	b. Otitis Medi	a			3 2	-	
					2	-	
7	Nose and Throat			1000	12	2	
8	Speech .				9	1	
9	Lymphatic Gland	ds			_	_	
10	Heart				_	_	
11				* *	11	_	
12	Developmental:						
	The second secon				_	_	
					9	1	
13	Orthopaedic:						
					6	1	
					24	3 3	
					6	3	
14	Nervous System	:					
					1	-	
					-	_	
15	Psychological:						
	a. Developme	nt	* * *		3	_	
					14	3	
16					-	-	
17	Other				44	4	

Part III

Treatment of Pupils Attending Maintained and Assisted Primary and Secondary Schools (including Nursery and Special Schools)

Notes:—This part of the return should be used to give the total numbers of:

(i) cases treated or under treatment during the year by members of the Authority's own staff;

- (ii) cases treated or under treatment during the year in the Authority's school clinics under National Health Service arrangements with the Regional Hospital Board; and
- (iii) cases known to the Authority to have been treated or under treatment elsewhere during the year.

TABLE A-EYE DISEASES, DEFECTIVE VISION AND SQUINT

	Number of cases known to have been dealt with
External and other, excluding errors of refraction and squint	62 500
TOTAL	562
Number of pupils for whom spectacles were prescribed	225

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

	Number of cases known to have been dealt with
Received operative treatment: (a) for diseases of the ear	3 124 2 25
Total number of pupils in schools who are known to have been provided with hearing aids:	154
*(a) in 1958	1 7

^{*} A pupil recorded under (a) above should not be recorded at (b) in respect of the supply of a hearing aid in a previous year.

TABLE C—ORTHOPAEDIC AND POSTURAL DEFECTS

	Number of cases known to have been treated
 (a) Pupils treated at clinics or out-patients departments (b) Pupils treated at school for postural defects 	39 81
Total	120

Table D—Diseases of the Skin (excluding uncleanliness, for which see Table D of Part I)

				Number of cases known to have been treated
Ringworm:				
(a) Scalp	 			_
(b) Body	 			2
Scabies	 			_
Impetigo	 			25
Other skin diseases	 	* *	**	307
		To	TAL	334

TABLE E—CHILD GUIDANCE TREATMENT

			Number of cases known to have been treated
	uidance C	Clinics:	
Pupils treated at Child G By Psychiatrist	uidance C	Clinics:	 100

TABLE F-SPEECH THERAPY

	Number of cases known to have been treated
Pupils treated by speech therapists	 112

TABLE G-OTHER TREATMENT GIVEN

	Number of cases known to have been dealt with
(a) Pupils with minor ailments	241
under School Health Service arrangements	246
(c) Pupils who received B.C.G. vaccination(d) Other than (a), (b) and (c) above, please specify	346
Total (a) – (d)	587

Part IV

Dental Inspection and Treatment carried out by the Authority

(1)	Number of pupils inspected by the Authority's Der Officers:	ntal		
	(a) At Periodic Inspections		6,337 134	
				6,471
(2)	Number found to require treatment			2,634
(3)	Number offered treatment			2,634
(4)	Number actually treated			2,055
(5)	Number of attendances made by pupils for treatment including those recorded at 11 (h)			7,912
(6)	Half-days devoted to: (a) Periodic (School) Inspection		45 833	
(7)	Fillings: (a) Permanent Teeth		2,642	878
	(b) Temporary Teeth		243	2,885
(8)	Number of Teeth filled: (a) Permanent Teeth (b) Temporary Teeth		2,080 223	2,303
(9)	Extractions: (a) Permanent Teeth (b) Temporary Teeth		519 1,347	1,866
(10)	Administration of consul angesthating for contraction			
	Administration of general anaesthetics for extraction			1,021
(11)	Orthodontics: (a) Cases commenced during the year (b) Cases carried forward from previous year (c) Cases completed during the year (d) Cases discontinued during the year (e) Pupils treated with appliances (f) Removable appliances fitted (g) Fixed appliances fitted (h) Total attendances			61 77 37 7 78 73 28 1,194
(12)	Number of pupils supplied with artificial teeth			24
	Other operations:			-
(13)	(a) Permanent Teeth		3,205 716	3,921

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