

[Report 1968] / Medical Officer of Health, Eastbourne County Borough.

Contributors

Eastbourne (England). County Borough Council.

Publication/Creation

1968

Persistent URL

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

License and attribution

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

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

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



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

COUNTY BOROUGH OF EASTBOURNE



ANNUAL REPORT

OF THE

Medical Officer of Health

FOR

1968

ON THE

**Health, Welfare, School Health
and Meteorological Services**

AND AS

Medical Referee to the Eastbourne Crematorium

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



COUNTY BOROUGH OF EASTBOURNE

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR

1968

ON THE

**Health, Welfare, School Health
and Meteorological Services**

AND AS

Medical Referee to the Eastbourne Crematorium

KENNETH O. A. VICKERY, M.D., M.R.C.S., D.P.H.

Medical Officer of Health

COUNTY BOROUGH OF EASTBOURNE

1907

ANNUAL REPORT

1907

Medical Officer of Health

1907

1907

1907

Health, Welfare, School Health
and Meteorological Services

Medical Officer of Health to the County Borough of Eastbourne

REPORT OF THE MEDICAL OFFICER OF HEALTH

ANNUAL REPORT

HEALTH AND WELFARE SERVICE DEPARTMENT
Avenue Road
Eastbourne

October, 1969

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

PRINCIPAL CONTENTS

	<i>Page</i>
SECTION A General Information, Vital Statistics ..	13
SECTION B National Health Service Act (Local Health Services)	19
SECTION C Welfare Services	51
SECTION D Prevalence of, and Control over, Infectious and other Diseases	59
SECTION E Sanitary Circumstances of the Area ..	61
SECTION F Miscellaneous	85
SCHOOL HEALTH SERVICE	91
INDEX	118

Birth Rate

Following two years of relatively high rate (the corrected figure for 1968 of 12.46 now follows the national trend of a fall towards the levels which prevailed during the "60s).

General

The rising proportion of dependent elderly in the community, the relative insufficiency of community and hospital resources, and the increasing difficulty of recruitment of staff able and willing to provide physical care for the aged and handicapped has caused me to comment in terms of ever greater urgency in each successive Annual Report. However, my assessments of the implications of the south coast crisis in geriatric medicine and my recommendations, real or supposed, have

PRINCIPAL CONTENTS

Page	
13	Section A. General Information, Vital Statistics
19	Section B. National Health Service Act (Local Health Services)
21	Section C. Welfare Services
29	Section D. Prevention of and Control over Tuberculosis and other Diseases
61	Section E. Sanitary Circumstances of the Area
83	Section F. Miscellaneous
91	Section G. School Health Service
118	Index

ANNUAL REPORT

HEALTH AND WELFARE SERVICES DEPARTMENT

AVENUE HOUSE

EASTBOURNE

October, 1969

*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 this the seventy-seventh Annual Report of the state of the Public Health and the work of the Department.

The year 1968 was one of continued progress but was not marked by any major event, change or substantial completed project. Nevertheless demands upon the administrative sections continue to rise making it more difficult each year to publish this report in good time. Comment in this introduction and in other parts of the Report will be somewhat curtailed this year.

Statistical

The Registrar General's mid-year estimate of population admits a further increase of 1,400 persons over the previous year thus maintaining over a decade the highest rate of increase for any County Borough.

Reference to the numerous individual County Reports of the Registrar General relating to the 1966 sample census reveals that Eastbourne with 28.066 has the highest percentage of persons aged 65 and over for any County Borough whilst the administrative county of East Sussex has the highest percentage for any county (20.678 per cent.). All the indications are that these figures have already been significantly exceeded.

Birth Rate

Following five years of relatively high rate the corrected figure for 1968 of 12.46 now follows the national trend of a fall towards the levels which prevailed during the "fifties".

General

The rising proportion of dependent elderly in the community, the relative insufficiency of community and hospital resources, and the increasing difficulty of recruitment of staff able and willing to provide physical care for the aged and handicapped has caused me to comment in terms of ever greater urgency in each successive Annual Report. However, my assessment of the implications of the south coast crisis in geriatric welfare and my recommendations, real or supposed, have

recently received more than sufficient publicity and require no further exposition at the present time.

The turn of the year 1968-69 brought the retirement of two senior and respected members of staff. Our Chief Dental Officer for some twenty years, Mr. M. G. Berry will be greatly missed, not least by parents and children. He had a wonderful way of putting children and mothers at ease and eliminating the traditional terror of the dental surgery. The integrity of his clinical work represents a firm foundation upon which many a citizen of Eastbourne will bite for years to come. We wish him well in his retirement.

Mrs. S. M. James, Superintendent Health Visitor, also a popular member of staff for many years, possessed in addition to professional skill, the ability to preside with charm and distinction over public meetings. She will be greatly missed by voluntary bodies concerned with family health and welfare. Her splendid response to the challenge of war widowhood has been of inestimable gain to the community. We wish her every happiness upon her marriage.

I wish to place on record once again my appreciation of the understanding support and co-operation of the Members of the Council, the Chief Officers, my local medical and professional colleagues and the worthy and loyal staff of this Department.

I am, Mr. Mayor, Ladies and Gentlemen,

Yours faithfully,

KENNETH VICKERY,

Medical Officer of Health.

HEALTH SERVICES COMMITTEE

(as constituted at 31st December, 1968)

The Mayor:

COUNCILLOR C. G. SCOTT, J.P.

Chairman:

ALDERMAN C. E. DOBELL

Deputy Chairman:

ALDERMAN MRS. W. L. LEE

Alderman:

S. M. CAFFYN, C.B.E.

Councillors:

J. DOBSON

R. POYNTER

R. TOMSETT

MRS. E. F. M. WHITE, J.P.

Co-opted Members:

MR. J. A. FAIRCLOUGH—Eastbourne Executive Council

DR. D. A. CRAIB—Eastbourne Local Medical Committee

MR. D. S. MACLACHLAN—Eastbourne Hospital Management Committee

PUBLIC HEALTH COMMITTEE

(as constituted at 31st December, 1968)

The Mayor:

COUNCILLOR C. G. SCOTT, J.P.

Chairman:

ALDERMAN MRS. W. L. LEE

Deputy Chairman:

COUNCILLOR W. J. EVENDEN

Councillors:

MRS. U. E. G. GARDNER

L. G. HARRIS

K. G. HURREY

R. TOMSETT

T. W. WARD

MRS. E. F. M. WHITE, J.P.

WELFARE SERVICES COMMITTEE

(as constituted at 31st December, 1968)

The Mayor:

COUNCILLOR C. G. SCOTT, J.P.

Chairman:

COUNCILLOR T. W. WARD

Deputy Chairman:

COUNCILLOR A. G. BANFIELD

Aldermen:

M. SKILTON

C. E. DOBELL

Councillors:

J. R. BATHE

J. DOBSON

R. TOMSETT

MRS. E. F. M. WHITE, J.P.

HEALTH AND WELFARE SERVICES DEPARTMENT STAFF

(in post at 31st December, 1968)

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:

WALTER JAMES WIGFIELD, M.A., M.B., B.Chir., D.P.H.

Senior Medical Officer:

MARJORIE I. GODSON, M.B., Ch.B., D.P.H.
(Certificate in Radiological Protection)

Departmental Medical Officers:

MARY SIMPSON, M.B., Ch.B., D.P.H.
(Diploma in Anaesthetics)

U. M. DUGAN, M.B., B.S. (Part-time)

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:

EDWARD EDLINGTON (a) (b) (c)

Deputy Chief Public Health Inspector:

F. T. RIPPIN (a) (b)

Public Health Inspectors:

G. R. EYSENCK (e)

L. G. HOWARD (a) (b)

A. MATTHEWS (a) (b) (d)

T. MATTHEWS, S.R.N. (a) (b) (c)

G. N. RICHARDS (a) (b)

Pupil Public Health Inspector:

G. E. RUTLAND

Technical Assistant:

S. A. HALL

Qualifications:

- (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors' Examination Joint Board.
- (b) Meat and Food Inspector's Certificate, Royal Society of Health.
- (c) Smoke Inspector's Certificate, Royal Society of Health.
- (d) Sanitary Science Certificate, Royal Society of Health.
- (e) Public Health Inspector's Diploma.

Superintendent of Home Nursing Service and Non-Medical Supervisor of Midwives:

MISS N. E. RUSSELL, R.F.N., S.R.N., S.C.M., Q.N., H.V.Cert.

Deputy Superintendent of Home Nursing:

R. S. NEWMAN, S.R.N., Q.N.

Senior District Nurse:

MRS. J. E. RAINSLEY, S.R.N., Q.N.

District Nursing Sisters:

Whole-time

MRS. E. EKREM, S.R.N., Q.N.
MISS E. M. LEE, S.R.N., Q.N.
MRS. S. MARKEY, S.R.N., Q.N.
MRS. G. M. MEEN, S.R.N., Q.N.
MISS J. PEARSON, S.R.N., S.C.M., Q.N.
MRS. A. C. PERKINS, S.R.N., S.C.M.
MISS J. A. U. PETERS, S.R.N., S.C.M., Q.N.
*A. ROTCHELL, S.R.N., Q.N.
*J. W. SELMES, S.R.N.
MRS. M. I. THORNE, S.R.N., S.C.M., Q.N.

**District Nursing Officers*

District Nurse/Midwife:

MRS. I. M. JENNER, S.R.N., S.C.M.

Part-time District Nursing Sisters:

MRS. I. BOOTHROYD, S.R.N., R.F.N., Q.N.
MRS. M. J. GRENFELL, S.R.N.
MRS. C. HEALY, S.R.N., R.M.N.
MRS. M. A. NEWMAN, S.R.N.
MRS. S. M. SHANDLEY, S.R.N.
MRS. N. SPENCE, S.R.N.
MRS. M. E. SULEMAN, S.R.N.

District Nurses:

Full-time

MISS B. ATKINSON, S.E.N.
MRS. E. HOLTOM, S.E.N.
MISS K. NEWTON, S.E.N.
MRS. D. C. PINYOUN, S.E.N.
MRS. D. T. WALDEN, S.E.N.

Part-time

MRS. J. A. MILLICHAMP, S.E.N.
MRS. A. REYNOLDS, S.E.N.
MRS. A. M. URIDGE, S.E.N.

Nursing Auxiliaries:

Part-time

MRS. D. B. M. BARTHOLOMEW
MRS. C. M. CARLSON
MRS. M. HALSEY
MRS. O. LANGTON
MISS K. PARSLAW
MRS. J. B. STEPHENSON

Domiciliary Midwives:

MISS M. A. BENNETT, S.C.M.
MISS F. M. SCAMMELL, S.R.N., S.C.M.

Superintendent Health Visitor:

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

Senior Health Visitor:

MRS. D. I. DALE, S.R.N., S.C.M., H.V. Cert.

Health Visitors:

MISS B. D. BEALE, S.R.N., S.C.M., H.V. Cert.

MISS J. C. M. BERK, S.R.N., H.V. Cert.

MISS E. E. GRIFFIN, S.R.N., S.C.M., H.V. Cert.

MISS H. HAMILTON MOSS, S.R.N., S.C.M., H.V. Cert.

MISS B. J. HUDSON, S.R.N., S.C.M., H.V. Cert.

(Diploma in Social Studies)

MISS H. M. PATTERSON, S.R.N., H.V. Cert.

MISS A. N. RANKS, S.R.N., S.C.M., H.V. Cert.

MRS. E. L. SNASHALL, S.R.N., H.V. Cert.

MISS B. G. STEVENS, S.R.N., S.C.M., H.V. Cert.

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

MRS. M. F. TOMSETT, S.R.N., H.V. Cert.

Student Health Visitor:

MISS J. K. MITCHENER, S.R.N.

Clinic Assistant:

MRS. J. W. NETHERCOTT

Health Education Officer:

MISS M. G. HEMMING, S.R.N., H.V. Cert.

Health Education Assistants (Part-time):

MRS. V. BUCKLAND

E. C. THOMPSON

Home Help Service:

MRS. V. HARDY KING, M.I.H.H.O., Home Help Organiser

MRS. E. M. BRACEY, Assistant Home Help Organiser

Mental Welfare and Welfare Services:

V. O. F. LITTLE, F.I.S.W., L.M.R.S.H., Welfare Services Officer

H. A. HURT, A.I.S.W., Senior Mental Welfare Officer and Deputy Welfare Services Officer

MRS. S. D. GREEN, M.S.M.W.O., Diploma in Social Studies, Deputy Senior Mental Welfare Officer

Mental Welfare and Welfare Officers:

MISS M. J. BIGNALL Diploma in Social Studies

MRS. C. A. EVANS, S.R.N., S.C.M., H.V. Cert.

MISS E. E. INESON, Senior Social Welfare Officer for the Blind

MRS. M. H. LADLEY, Social Welfare Officer for the Blind

MISS R. WALKER, S.R.N., S.C.M., Q.N., H.V. Cert.

(Diploma in Social Studies)

Welfare Assistants:

MRS. P. N. CLARK, S.E.N.

MISS A. H. MAGGS

MRS. V. E. SMITH, S.E.N.

Occupational Therapist:

MRS. P. M. ROBERTSON, M.A.O.T.

Speech Therapist:

MRS. K. G. HANSFORD

Administrative and Clerical Staff:

E. TARBUCK, Chief Administrative Assistant
W. L. PECK, Senior Administrative Assistant
P. G. CLARK, D.M.A., Administrative Assistant

Section Clerks:

MISS B. DOUCH	R. E. STONEHEWER
MISS M. S. HARDY	MISS G. E. WOODS
D. E. MOSELEY	MRS. V. M. YOUNG

Secretary to Medical Officer:

MISS P. J. HOADLEY

Secretarial and Filing:

MISS D. M. BEETLESTONE	MISS H. E. MASON
MRS. J. C. RUDMAN	

Clerical:

MRS. P. BALL (Part-time)	MRS. M. HODKINSON
MRS. E. COOPER (Part-time)	MRS. S. M. HOOK (Part-time)
E. G. ELKINGTON	MISS J. P. JENNINGS
G. M. FITZHUGH	MRS. G. M. MORRIS
MISS P. A. FOWLER	MRS. J. A. PARSONS

Dental Surgery Assistants:

MRS. D. J. ANDREWS (Part-time)	MISS K. FARRINGTON
MISS K. A. LAMBERT	

Chiropodists (Whole-time):

D. J. BETTLES, M.Ch.S., S.R.Ch. J. D. MOULT, L.Ch., S.R.Ch.

Part-time Chiropodist:

MRS. J. CHAPMAN, M.Ch.S., S.R.Ch.

Chest Physician:

A. H. FERGUSON GOW, M.R.C.S., L.R.C.P.
(Joint appointment with S.E. Metropolitan Regional Hospital Board)

Public Analyst:

T. E. RYMER, F.R.I.C.

Supervisory Staffs of Homes and Hostels, etc.:

Princes Park Day Nursery	MISS M. J. KENNEDY, Matron
Junior Training Centre	MISS E. BURNS, Principal
Hazel Court Hostel	MRS. I. BROWN, Matron
Occupation/Training Centre	G. E. TOWNSEND, Superintendent
The Yews	MRS. W. G. McLAUGHLIN, Matron
Cavendish Lodge	G. W. SCHOFIELD, Superintendent
Trevin Towers	W. H. OLIVER, Superintendent
Staveley Court	F. W. MEPHAM, Superintendent
St. Anthony's Court	C. ROBERTS, Superintendent
Willoughby Court	L. T. SPENCER, Superintendent
Parker House	MRS. J. E. JERRATT, Matron

Staff of the Health and Welfare Services Department at 31.12.68

	Full-time	Part-time	Total
Medical Officers of Health, Deputy and Assistants	4	1	5
Dental Officers	2	—	2
Administrative and Clerical Staff	20	3	23
Dental Surgery Assistants	2	1	3
Public Health Inspectors	7	—	7
Student Public Health Inspector	1	—	1
Health Visitors, including Superintendent	13	—	13
Student Health Visitor	1	—	1
Clinic Nurse	1	—	1
Home Help Organisers	2	—	2
Home Nurses, including Superintendent	19	10	29
Domiciliary Midwives	2	—	2
Nursing Auxiliaries	—	6	6
Social Welfare Officers for the Blind	2	—	2
Occupational Therapist and Handicraft Instructors	—	2	2
Speech Therapist	1	—	1
Welfare Assistants	3	—	3
Chiropodists	2	1	3
Health Education Officers and Assistants	1	2	3
Welfare Officer and Mental Welfare Officers	6	—	6
Day Nursery	9	5	14
Occupation Centre	3	5	8
Junior Training Centre and Hostel	12	11	23
Old People's Homes	67	45	112
The Yews Hostel	1	2	3
Old Town and Seaside Baths	4	3	7
Domestic Helps	—	56	56
Technical Assistant	1	—	1
Rodent Operator	1	—	1
Others, <i>i.e.</i> Cleaners, Caretaker, Van Driver	2	8	10
	<hr/>	<hr/>	<hr/>
	189	161	350
	<hr/>	<hr/>	<hr/>

SECTION A

GENERAL

Vital Statistics

Notification of Births

General Information—Natural and Social Conditions

VITAL STATISTICS

Estimated mid-year population: 68,200

Registered Births	<i>Males</i>	<i>Females</i>	<i>Total</i>
Live births—Legitimate	289	299	588
Illegitimate	33	38	71
	—	—	—
	322	337	659
	—	—	—
Still births—Legitimate	4	—	4
Illegitimate	—	1	1
	—	—	—
	4	1	5
	—	—	—
<i>Deaths</i>			
All causes	603	724	1,327
	—	—	—

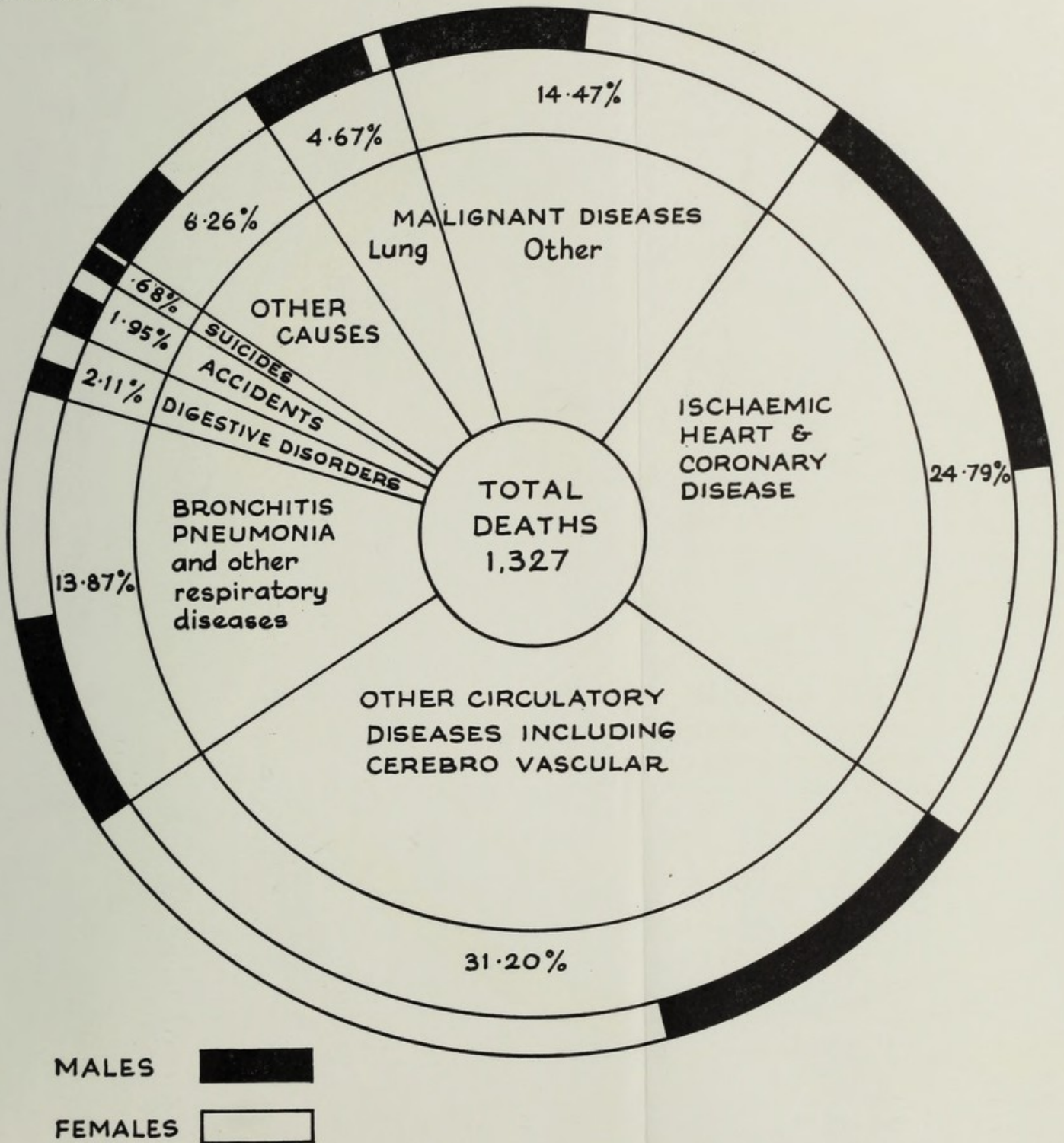
Live births:	<i>Eastbourne</i>	<i>England & Wales</i>
Number	659	819,272
Rate per 1,000 population	9.66	16.9
Live birth rate per 1,000 population after applying "Area Comparability Factor" (1.29)	12.46	—
Illegitimate live births per cent. of total live births	10.77	8.4
Still births:		
Number	5	11,848
Rate per 1,000 live and still births	7.53	14.3
Total live and still births	664	—
Infant deaths (deaths under one year)	13	14,982
Infant mortality rates:		
Total infant deaths per 1,000 total live births	19.72	18.3
Legitimate infant deaths per 1,000 legiti- mate live births	20.40	—
Illegitimate infant deaths per 1,000 illegiti- mate live births	4.08	—
Neo-natal mortality rate (deaths under four weeks per 1,000 total live births)	18.20	12.4

	<i>Eastbourne</i>	<i>England & Wales</i>
Early neo-natal mortality rate (deaths under one week per 1,000 total live births) ..	16.69	10.5
Peri-natal mortality rate (still births and deaths under one week combined per 1,000 total live and still births)	24.09	24.7
Maternal mortality (including abortion):		
Number of deaths	Nil	198
Rate per 1,000 total live and still births ..	Nil	0.24
Death rate (crude) per 1,000 population ..	19.45	11.9
Death rate after applying "Area Comparability Factor" (0.54)	10.50	—
Deaths from Tuberculosis	Nil	2,091
Tuberculosis death rate per 1,000 population ..	Nil	0.04

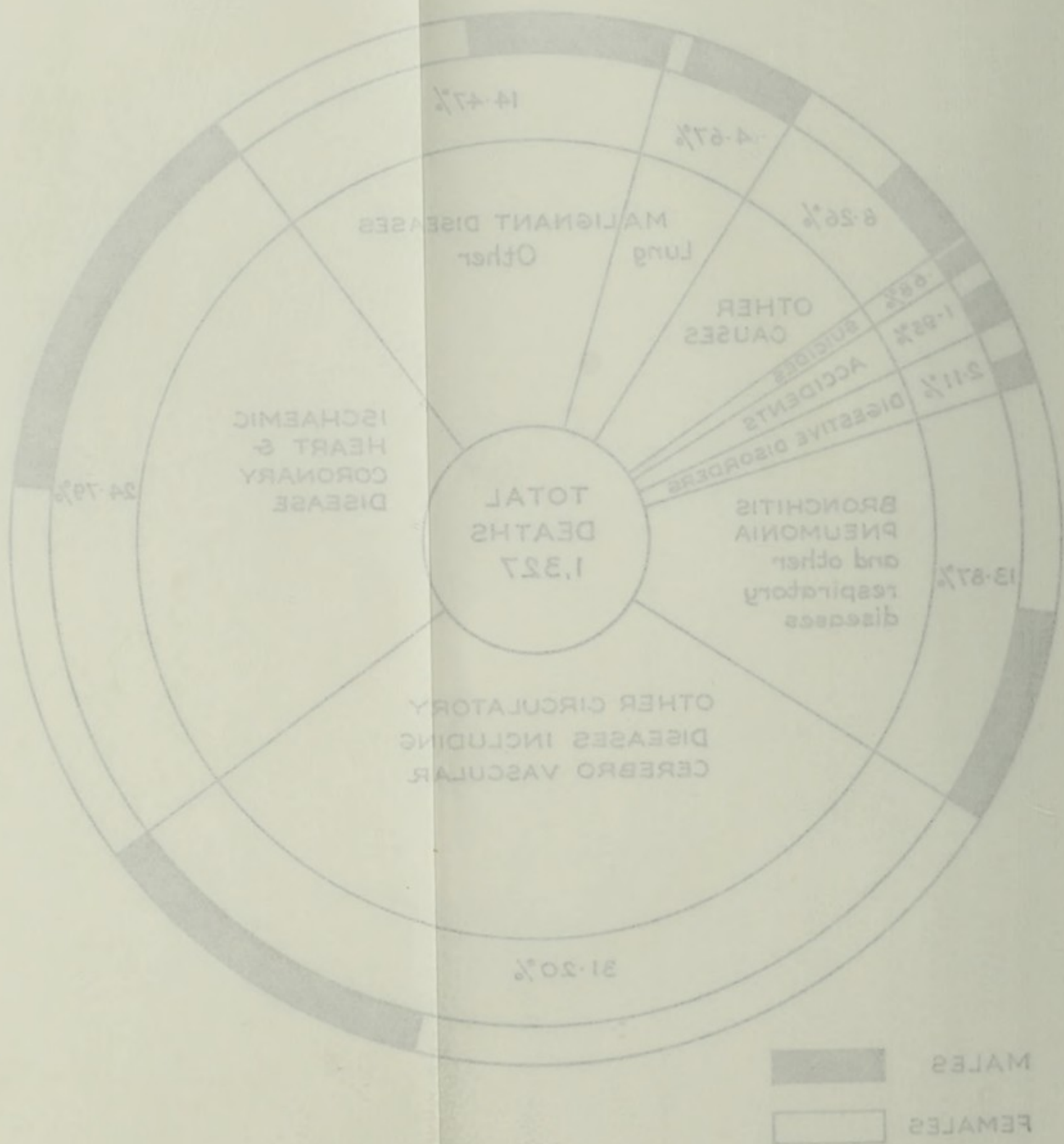
Causes of Death

	<i>Males</i>	<i>Females</i>	<i>Total</i>
Other infective and parasitic diseases ..	2	—	2
Malignant neoplasm—stomach	11	8	19
Malignant neoplasm—lung, bronchus ..	52	10	62
Malignant neoplasm—breast	—	31	31
Malignant neoplasm—uterus	—	8	8
Leukaemia	4	5	9
Other malignant neoplasms	64	61	125
Benign and unspecified neoplasms	1	1	2
Diabetes Mellitus	2	1	3
Other Endocrine diseases, etc.	1	—	1
Other diseases of nervous system, etc. ..	3	10	13
Chronic rheumatic heart disease	3	10	13
Hypertensive disease	6	9	15
Ischaemic heart disease	170	159	329
Other forms of heart disease	36	80	116
Cerebrovascular disease	91	148	239
Other diseases of circulatory system ..	13	31	44
Influenza	7	15	22
Pneumonia	34	67	101
Bronchitis and Emphysema	41	12	53
Asthma	4	—	4
Other diseases of respiratory system ..	2	2	4
Peptic Ulcer	7	4	11
Intestinal obstruction and hernia	2	4	6
Cirrhosis of liver	—	1	1
Other diseases of digestive system	5	12	17
Nephritis and Nephrosis	1	—	1
Hyperplasia of prostate	5	—	5
Other diseases, genito-urinary system ..	3	7	10
Diseases of musculo-skeletal system ..	1	3	4
Congenital anomalies	5	2	7
Birth injury, difficult labour, etc. ..	3	1	4
Other causes of perinatal mortality ..	3	—	3

Analysis of Causes of Death by Percentage of All Causes



Analysis of Causes of Death by Percentage of All Causes



	<i>Males</i>	<i>Females</i>	<i>Total</i>
Symptoms and ill-defined conditions.. ..	1	7	8
Motor vehicles accidents	5	—	5
All other accidents	12	9	21
Suicide and self-inflicted injuries	3	6	9
	—	—	—
TOTAL ALL CAUSES	603	724	1,327
	—	—	—

This table and the accompanying chart are not readily comparable with previous charts because of revised official classification of causes of death.

Extract from Death Returns for the year ended 31st Dec., 1968

(Locally compiled statistics)

<i>Age</i>	<i>Malignant neoplasm, lung, bronchus</i>		<i>Coronary disease, angina</i>	
	<i>Males</i>	<i>Females</i>	<i>Males</i>	<i>Females</i>
42	1	1	2	—
45	—	—	1	—
47	1	—	—	—
48	—	—	1	—
50	—	—	—	1
51	—	1	1	—
52	—	—	—	1
53	—	—	3	—
54	1	—	2	2
55	1	—	2	1
56	1	—	4	—
57	—	—	3	—
58	2	—	3	—
59	—	—	2	—
60	1	1	6	2
61	1	1	2	1
62	3	—	5	—
63	3	—	3	2
64	2	1	3	—
65	2	—	5	2
66	5	—	6	2
67	2	—	1	4
68	2	—	4	2
69	4	—	4	2
70	—	—	5	4
71	1	—	3	3
72	1	1	2	4
73	3	—	2	—
74	—	2	6	4
75 and over	15	2	52	52
	—	—	—	—
	52	10	133	89
	—	—	—	—

Age Mortality		Males	Females	Total
Under 1	.. .. .	10	3	13
1-5	.. .. .	—	—	—
5-15	.. .. .	1	1	2
15-25	.. .. .	4	—	4
25-45	.. .. .	11	6	17
45-65	.. .. .	116	70	186
65-75	.. .. .	167	163	330
75 and over	.. .. .	294	481	775
		<u>603</u>	<u>724</u>	<u>1,327</u>

Deaths from Cancer

Year	Population	Age Groups						Total Deaths	Death Rate per 1,000 Population
		0-1	1-5	5-15	15-45	45-65	65 and over		
1950	58,050	—	—	—	9	54	100	163	2.80
1951	57,510	1	—	1	4	46	77	128	2.22
1952	57,200	—	—	—	4	46	94	144	2.51
1953	57,190	—	—	—	8	55	5	148	2.61
1954	57,600	—	—	—	4	33	96	133	2.30
1955	57,830	—	1	—	3	51	113	168	2.91
1956	57,850	—	—	—	5	46	103	154	2.66
1957	57,800	—	—	—	3	58	124	185	3.20
1958	57,680	—	—	—	9	40	121	170	2.95
1959	57,800	—	1	1	5	84	91	181	3.13
Total	—	1	2	2	54	513	1,004	1,574	—
1960	57,940	—	—	—	4	53	120	177	3.05
1961	59,830	—	—	1	10	59	135	205	3.43
1962	61,250	—	—	—	7	74	125	206	3.36
1963	62,010	—	1	1	5	58	134	199	3.21
1964	63,530	—	—	1	6	70	146	223	3.51
1965	64,620	—	—	1	3	61	153	218	3.37
1966	65,630	—	1	1	4	56	168	230	3.51
1967	66,800	—	—	1	5	63	154	223	3.33
1968	68,200	—	—	1	6	60	187	254	3.72

Analysis of Suicides (Eastbourne Residents) in Age Groups for years 1954 to 1968

Years	Age Groups														Totals		
	15-25		25-35		35-45		45-55		55-65		65-75		75 and over		M	F	Total
	M	F	M	F	M	F	M	F	M	F	M	F	M	F			
1954	-	-	1	-	-	-	4	-	-	1	2	1	1	7	3	10	
1955	-	-	-	2	-	-	-	3	-	-	-	1	-	1	-	7	
1956	-	-	-	-	-	-	1	2	-	1	-	3	1	-	2	6	
1957	-	-	-	2	1	-	2	2	1	2	1	3	1	-	6	9	
1958	-	-	-	-	-	-	-	-	1	2	1	-	-	-	2	2	
1959	-	-	-	1	-	-	1	2	-	-	-	4	1	-	2	8	
1960	-	-	-	1	1	-	3	4	1	2	-	-	-	-	5	7	
1961	1	-	2	2	-	-	4	1	-	-	-	1	1	1	8	5	
1962	-	-	-	1	-	-	1	6	-	-	-	1	-	2	1	10	
1963	1	1	-	-	-	-	-	1	1	2	-	1	1	-	3	5	
1964	-	-	-	-	-	1	-	2	-	4	-	2	-	-	-	9	
1965	1	-	-	1	-	2	2	-	2	1	1	4	1	1	7	9	
1966	-	-	2	-	1	1	4	1	2	2	1	1	1	4	11	10	
1967	-	-	-	-	3	-	-	1	3	2	1	2	-	1	7	6	
1968	1	-	-	-	1	-	1	1	-	2	-	2	-	1	3	6	
Totals	4	1	5	11	7	4	23	26	11	20	6	28	8	12	64	102	

REGISTRATION AND NOTIFICATION OF BIRTHS

Live Births Registered from 1949 to 1968 (from Registrar General's Returns) and Rate per 1,000 Population (corrected)

<i>Number Rate</i>				<i>Number Rate</i>			
1949	..	..	740 13.0	1959	..	..	579 11.4
1950	..	..	701 13.5	1960	..	..	634 12.5
1951	..	..	644 11.5	1961	..	..	663 12.6
1952	..	..	635 11.9	1962	..	..	694 12.9
1953	..	..	617 11.7	1963	..	..	760 15.6
1954	..	..	612 12.1	1964	..	..	699 14.1
1955	..	..	553 10.9	1965	..	..	677 13.4
1956	..	..	563 11.1	1966	..	..	738 14.3
1957	..	..	602 11.9	1967	..	..	732 14.1
1958	..	..	603 11.9	1968	..	..	659 12.4

Illegitimate Live Birth Rate, 1957-1968*

1957	..	..	5.1	1963	..	..	7.7
1958	..	..	6.6	1964	..	..	8.7
1959	..	..	6.4	1965	..	..	10.3
1960	..	..	9.0	1966	..	..	11.8
1961	..	..	8.6	1967	..	..	11.2
1962	..	..	8.6	1968	..	..	10.7

*Percentage of total births

Notification of Births

1,298 live births and 10 still births took place in the Borough and were notified to the Local Authority. 643 live births and 5 still births were to mothers resident in Eastbourne, and 655 live births and 5 still births were to mothers resident outside the Borough.

In addition there were 5 transfers of live births relating to Eastbourne mothers confined elsewhere. (NOTE: *The total of Registered Births is not necessarily identical with the total of Notified Births.*)

Analysis of Notified Births

	Resident		Non-Resident		Total		Total
	Live Births	Still Births	Live Births	Still Births	Live Births	Still Births	All Births
DOMICILIARY							
Local Authority Midwives	20	—	—	—	20	—	20
Inward Transfers	—	—	—	—	—	—	—
	20	—	—	—	20	—	20
INSTITUTIONAL							
Maternity	358	—	207	—	565	—	565
St. Mary's Hospital	265	5	448	5	713	10	723
Inward Transfers	5	—	—	—	5	—	5
Total Institutional	628	5	655	5	1,283	10	1,293
Total, All Births, 1968	648	5	655	5	1,303	10	1,313
Notified Births, 1967	718	6	640	7	1,358	13	1,371

GENERAL INFORMATION

Situation and Climate

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

Eastbourne occupies a favoured situation on and at the foot of the eastern slope of the South Downs, facing the English Channel, with protection from prevailing westerly winds. Sunshine records are consistently among the highest recorded on the mainland. This is partly due to the peninsular position of the Borough.

Elevation

The highest point is about 640 ft. above sea level on the Downs, sloping from the west to a minimum of 6.58 ft. above highest mean sea level in the east of the Borough.

Area

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

which is preserved from building development. There remains, however, considerable land available for future development.

Financial

NUMBER OF SEPARATE ASSESSMENTS: 30,635.

RATEABLE VALUE at 1st April, 1969: £3,834,218.

RATES: Domestic, 11s. 3d. Mixed hereditaments, 11s. 11d. Business and Commercial, 12s. 6d.

PRODUCT OF 1D. RATE: £15,775.

METEOROLOGY—76 years' average:

Temperatures: Max. 55·8° F.; Min. 45·5° F.; Mean 50·7° F.,
Sea 52° F.

Sunshine: Total 1,810·2 hours; Daily 4·96 hours.

Rainfall: Total 31·68 inches; Days 163.

Visitors to Eastbourne

The natural physical environment of the town accompanied by pleasant climatic conditions and fostered by the Corporation's efforts to provide supportive amenities, attracts holiday makers in their thousands. Many of these see Eastbourne as an ideal place of retirement but unfortunately the growing proportion of elderly in the population is outstripping the provision of hospital, nursing home and community care facilities.

During the holiday period many extra demands are made on most services which are met within the resources of the department.

SECTION B

NATIONAL HEALTH SERVICE ACT

Ante-natal, Mothercraft and Relaxation Classes

This service continued as described in my report for 1965. See also under Health Education and Midwifery Sections, pages 27 and 25.

Sessions and Attendances

	<i>Average number of sessions per month</i>	<i>Number of women who attended</i>	<i>Number of new cases</i>	<i>Attendances</i>
Health Education (Health Visitors)	17	400	16	2,010
Relaxation Sessions (Midwives)				

Infantile and Child Mortality

The deaths of thirteen infants under one year of age were recorded. Eleven of these occurred during the first week of life.

<i>Age</i>	<i>Sex</i>	<i>Cause of Death</i>
5 hours	M	1 (a) Cardio-respiratory failure.
7 hours	M	1 (a) Cardio-respiratory failure. (b) Congenital pulmonary atelectasis.
7 hours	M	1 (a) Prematurity
8 hours	F	1 (a) Cerebral haemorrhage. 2 Atrial septal defect.
9 hours	M	1 (a) Cardio-respiratory failure. (b) Congenital pulmonary atelectasis. (c) Birth by caesarian section.
11 hours	M	1 (a) Cardio-respiratory failure. 2 Premature 31 weeks.
19 hours	M	1 Prematurity.
1 day	F	1 (a) Anencephaly. (b) Multiple congenital abnormalities.
3 days	M	1 (a) Cardio-respiratory failure. (b) Respiratory distress syndrome.
5 days	M	1 (a) Cardiac failure. (b) Congenital heart disease.
5 days	M	1 (a) Pulmonary atelectasis. (b) Atrial septal defect.
3 weeks	M	1 (a) Mechanical asphyxia.
4 months	F	1 (a) Bronchopneumonia. 2 Congenital heart disease.
7 years	F	1 (a) Astrocytoma.
14 years	M	1 (a) Fractured skull and cerebral haemorrhage.

Maternal and Infantile Mortality, 1894-1968

<i>Years</i>	<i>Infant Deaths</i>	<i>Infantile Mortality Rate</i>	<i>Maternal Deaths</i>	<i>Maternal Mortality Rate</i>
1894-1903 Average ..	108.5	118.2	3.6	4.6
1904-1913 Average ..	79.3	96.6	2.6	2.9
1914-1923 Average ..	52.3	68.8	1.5	1.9
1924-1933 Average ..	30.0	45.7	1.5	2.2
1934-1943 Average ..	23.6	42.4	2.1	3.7
1944-1953 Average ..	17.4	23.4	1	1.3
1954-1963 Average ..	12.3	19.64	0.3	0.47
1964	10	14.31	-	-
1965	13	19.20	-	-
1966	10	13.55	-	-
1967	11	15.02	1	1.3
1968	13	19.72	-	-

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

Equipment is provided by the department for the care of premature infants born at home and very satisfactory provision is available in the hospitals. The ambulance fleet has been adapted to utilise a portable incubator held at a local hospital in the event of an emergency requiring the removal of a newly-born infant to hospital.

(a) NUMBER OF PREMATURE LIVE BIRTHS NOTIFIED

<i>Place of Birth</i>	<i>Resident</i>	<i>Non-resident</i>	<i>Total</i>
Own home	1	—	1
Maternity Home ..	3	8	11
Hospital (St. Mary's) ..	32	41	73
Hospital (elsewhere) ..	—	—	—
	—	—	—
	36	49	85
	—	—	—

(b) DEATHS OF PREMATURE INFANTS WITHIN 28 DAYS

	<i>Resident</i>	<i>Non-resident</i>	<i>Total</i>
(i) Died within first 24 hours:			
St. Mary's Hospital	4	1	5
Maternity Home	—	—	—
Own Home ..	1	—	1
	—	—	—
	5	1	6
	—	—	—

(ii) Died within 1-28 days: None.

Congenital Malformations

The number of congenital malformations noticed at birth and notified in accordance with Ministry of Health Circulars 13/63 during the year 1968 was 13 (9 children).

These malformations were classified as follows:

Central nervous system .. ..	..	..	..	2
Eye and ear .. ..	..	..	..	1
Alimentary system .. ..	..	..	..	2
Heart and great vessels .. ..	..	..	..	—
Respiratory system .. ..	..	..	..	—
Uro-genital system .. ..	..	..	..	1
Limbs .. ..	..	..	..	4
Other skeletal .. ..	..	..	..	—
Other systems .. ..	..	..	..	2
Other malformations .. ..	..	..	..	1

One of these babies died within the first 24 hours.

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. I am indebted to Sister Jackman for the following report on her work in 1968.

The 76 new cases dealt with this year are made up as follows:

Illegitimate pregnancies	50
Applications to adopt	13
Help and advice	13

Enquiries concerning adoption have risen this year. The number of illegitimate pregnancies is slightly down compared to last year.

The age range of the mothers is from 15 to 42, by far the largest number being in the 18 to 20 group. Fourteen girls have kept their babies, two are with foster parents and one is in a nursery. Four girls married the putative fathers of their children, twelve babies were offered for adoption, one died and seven are not yet born.

There was one abortion and we have lost touch with three clients. Twelve of the new cases had come to Eastbourne from other areas.

Eighteen putative fathers have been contacted, and twelve were interviewed and accepted responsibility and helped as they were able.

Help and advice has been given to girls who, in difficult circumstances, are trying to keep their babies and we are grateful to the voluntary societies for their generous financial help through grants.

Child Welfare Clinics

These were held at the following times:

Avenue House—Monday, morning and afternoon, and Friday afternoon.

Acacia Villa, Seaside—Tuesday, morning and afternoon.

Green Street—Wednesday, morning and afternoon.

Langney Village Community Centre—Thursday afternoon.

Hampden Park Hall—Wednesday and Friday afternoons.

CLINIC ATTENDANCES, 1968

Clinic	Number of Children attending Clinics Born in:				Total Attendances
	1968	1967	1963-66	Total	
Avenue House	182	219	347	748	4,904
Green Street	155	141	283	579	3,626
Acacia Villa	145	141	328	614	4,420
Langney	45	51	206	302	1,812
Hampden Park	135	168	501	804	4,783
TOTAL	662	720	1,665	3,047	19,545

PREVIOUS YEAR'S ATTENDANCES	<i>Number of children who attended</i>	<i>Number of attendances</i>
1964	2,671	19,883
1965	2,709	18,107
1966	2,839	18,554
1967	2,900	20,127

Welfare Foods and Other Nutrients

Arrangements for distribution have continued to run smoothly with the main centre for distribution being the Local Authority's central welfare clinic at Avenue House. The four outlying welfare centres continued as subsidiary distribution centres during the normal clinic sessions, and in addition weekday distribution was made in the mornings and afternoons at the W.R.V.S. Centre in Hyde Road, commencing on 1st July, 1967.

Under the Authority's arrangements for the care of mothers and young children a wide variety of dried milk foods, cereals and other nutrients is made available for resale on the recommendation of the Medical Officer or Health Visitor in attendance at the child welfare sessions.

REPORT OF THE CHIEF DENTAL OFFICER

Sixty-eight sessions were devoted to the inspection and treatment of expectant and nursing mothers and to children under the age of five. Forty-nine expectant and nursing mothers were seen at the Avenue House Clinic and made 171 attendances. Of these, 37 were found to require treatment and all were offered treatment and 26 were actually treated. Twenty-three fillings were inserted and 22 teeth were extracted. Scaling and gum treatment were carried out on 13 patients, and one full denture and two partial dentures were constructed, the laboratory work being undertaken by a local dental technician. Five patients were also referred for radiological examination, this being carried out at the Clinic with the department's own X-ray apparatus.

Of 236 children under school age inspected, 150 were found to require treatment. One hundred and twenty-eight were actually treated and made 363 attendances; 235 temporary teeth were extracted and 14 temporary teeth were filled. In addition, 16 temporary teeth were conserved with silver nitrate treatment and 11 pre-school children were referred for X-rays. All extractions were carried out under general anaesthesia, nitrous oxide and oxygen, and this was administered on 133 occasions.

The ratio of teeth extracted to those conserved for these under-five children cannot be regarded in any way as satisfactory. On only too many occasions these children are seen at the Clinic for the first time when suffering from toothache, a condition usually necessitating a general anaesthetic and extractions. This is the worst possible introduction for a very young child to the dental surgery, and it is hoped that in the near future a system of regular routine inspections, similar to that

already carried out in the School Dental Service, can be arranged for all children from the age of three upwards. It is only by the early detection of dental caries that the temporary or deciduous dentition can be efficiently preserved.

Summary of Treatment

(a) NUMBERS PROVIDED WITH DENTAL CARE

	<i>Examined</i>	<i>Needing Treatment</i>	<i>Treated</i>
Expectant and nursing mothers	49	37	24
Children under five ..	236	150	138

(b) FORMS OF DENTAL TREATMENT PROVIDED

	<i>Scaling and gum treatment</i>	<i>Fillings</i>	<i>Silver Nitrate</i>	<i>Crowns and Inlays</i>	<i>Extractions</i>	<i>General Anaesthetics</i>	<i>Dentures</i>		<i>X-rays</i>
							<i>Full</i>	<i>Part</i>	
Expectant and Nursing Mothers	13	23	—	—	22	8	1	2	5
Children under five	—	14	16	—	235	133	—	—	11

PRINCES PARK DAY NURSERY

(60 PLACES)

The establishment, excluding domestic staff consists of matron, deputy matron, 3 trained nursery nurses and 5 nursery assistants.

The total attendances were 16,455, an average attendance of 53.42 for the 308 days on which the nursery was open. There is a substantial waiting list for nursery places, priority being accorded to cases of social need.

Attendances each Month during 1968

	<i>Children aged</i>			<i>Total attendances</i>	<i>Average daily attend.</i>	<i>No. of days open</i>	<i>Receipts</i>		
	<i>0-1½</i>	<i>1½-3</i>	<i>3-5</i>				£	s.	d.
January ..	133	451	640	1,224	45.33	27	216	7	0
February ..	135	423	709	1,267	50.68	25	272	16	6
March ..	148	453	702	1,303	50.11	26	328	17	6
April ..	162	422	647	1,231	51.20	24	242	0	6
May ..	193	554	857	1,604	59.41	27	276	19	0
June ..	169	456	695	1,320	54.95	24	342	0	0
July ..	179	525	833	1,537	56.92	27	292	6	6
August ..	167	505	693	1,365	50.55	27	306	2	6
September	153	500	714	1,367	56.95	24	280	18	6
October ..	219	518	815	1,552	57.48	27	263	14	0
November	169	473	746	1,388	53.38	26	321	3	6
December	156	454	687	1,297	54.04	24	233	9	6

MIDWIFERY SERVICE

The Midwifery Service continues to show a decrease in the number of mothers having their babies at home but there was an increase in the number of mothers discharged from Hospital and the Maternity Home before 10 days to the care of a Domiciliary Midwife. Of these early discharges, approximately 34 per cent. are the 2nd to 5th day, thereby requiring full nursing care.

	1967	1968
Discharged from Maternity Home and St. Mary's Hospital before 10 days ..	88	136

Health Teaching in Clinics and in the homes continues to be a major aspect of the Midwives work. We are very lucky in Eastbourne that our Midwives enjoy teaching and co-operate with the Health Visitors in giving comprehensive care to the mother irrespective of where the baby may be born.

Proportion of domiciliary confinements during the last five years:

		<i>Total births</i>	<i>Domiciliary confinements</i>	<i>Percentage of domiciliary confinements</i>
1964 ..		699	69*	9.6
1965 ..		677	65	9.6
1966 ..		738	43†	5.7
1967 ..		732	29	3.9
1968 ..		659	20	3.0

*Includes one non-resident

†Includes two inward transfers

It is to be noted that the number of institutional confinements is 97 per cent. of the total births.

Details of the work of the domiciliary midwives during the year are as follows:

CONFINEMENTS

(a) Doctor booked ..	Doctor present ..	7
	Doctor not present ..	13
(b) Doctor not booked ..	Doctor present ..	—
	Doctor not present ..	—
(c) Miscarriages ..	.. .. .	—

VISITS BY MIDWIVES

Ante-natal visits	702
Visits during labour	52
Visits during puerperium	399
Post-natal visits (domiciliary cases)	47
Visits to 136 cases discharged from hospital before the tenth day	661
	1,861

HEALTH VISITORS

The Superintendent Health Visitor reports:

We were pleased to welcome our student health visitor on our fully qualified staff in September.

Contact with general practitioners by liaison and full attachment continues to develop. Liaison with general practitioners has been carried on for some years but in 1968 this increased to an extent on which only full attachment could improve. The Health Visitors are now conducting prophylactic clinics in doctors' surgeries and so spreading the gospel of preventive medicine. There is a great deal of satisfaction in this team work.

PHENYLKETONURIA

This special urine test carried out on every infant at the age of ten days and six weeks is the method adopted at the present time for early diagnosis of certain mental defects and is performed by the Health Visitors.

HEARING TESTS

Babies from eight months old and again in the fifth year, have a hearing test, given by the Health Visitors in special clinic sessions.

BIRTHDAY CHECKS

These are very important annual medical checks carried out in the infant welfare clinics coinciding with a child's birthday.

PRE-SCHOOL CHECKS

Special sessions for the 4½-year-old—these are full medical examinations not especially to find defects but to give an ideal service of preventive medicine. Prophylactic injections are brought up to date.

PAEDIATRICS

The sessions with the Paediatrician in the local hospital are of immense value. They enable the Health Visitor to keep up to date with modern treatment, to see that appointments are kept and be informed of the state of children's physical and mental health.

ROUTINE VISITING

Selective visiting is much more prevalent but routine visits to families are still an important part of the Health Visitors' work.

NURSING STUDENTS

The Health Visitors were responsible for taking general nursing students out for one day to give them an insight into community care work.

HEALTH EDUCATION in all its aspects forms a considerable part of a health visitors function. In all her contacts the opportunity is taken to

disseminate advice on healthy living. More specialised functions are dealt with under the report of the Health Education Officer.

The Health Visitor's work is summarised in the following figures:

HOME VISITS

Care of mothers and young children—

Children born in 1968	..	..	..	3,054
Children born in 1967	..	..	..	2,382
Children born in 1963/66	..	..	..	5,274
Expectant mothers	..	..	..	767
Infectious illness	..	..	..	6
Tuberculosis	..	..	..	24
Care and after-care (including aged and handicapped persons)	..	..	..	5,833

OTHER VISITS

To other agencies (voluntary organisations, etc.)	..	810
To day nurseries	..	28
To hospitals	..	211
Miscellaneous	..	938

CLINIC ATTENDANCES

Child Welfare	..	936
Immunisation and vaccination	..	65
Health Education	..	428
Aged Persons	..	87

HEALTH EDUCATION AND HOME SAFETY

ANTE-NATAL MOTHERCRAFT AND RELAXATION CLASSES

Health Talks to expectant mothers including those from adjacent county areas continued to be given by Health Visitors and Midwives at Avenue House and Acacia Villa Clinics.

The Bell Hostel. Thirty-five unmarried expectant mothers attended mothercraft classes, 57 attended relaxation classes conducted by a Domiciliary Midwife.

Parentcraft Classes for expectant parents continued to be held on the first Wednesday evening of each month.

The Mothers' Club is held at Avenue House on alternate Thursday evenings. The programme included a number of talks on Health Education subjects, "Shoes for small feet", "Breath of life", "Nutrition for the family", "Terrible twos and lovable threes", "The Samaritans" and cookery demonstrations.

RETIRED CITIZENS

Health talks were given to retired citizens at the St. Michaels Luncheon Club. The club was launched on 12th September by the Geriatric Health Visitors. Meals prepared on the premises and served to those retired citizens numbered between 68-70 per week.

Avenue House Central Club. The average weekly attendance was 150 retired citizens. A Geriatric Health Visitor attended each week, and there were a number of "Any Questions?" Sessions held during the year. Liaison with the General Practitioners presented increasing opportunities for Health Education.

FOOD HYGIENE

Illustrated talks were given throughout the year by the Public Health Inspectors to persons concerned with Food Handling.

CANCER EDUCATION

Women who attended the weekly sessions for Cervical Cytology at Avenue House were given advice by a Health Visitor regarding breast self-examination. Smoking and lung cancer was a subject included in Health Talks to schools, and a subject chosen for the Health Education Project in Clinics and Window displays during January.

HEALTH EDUCATION TALKS

The subjects chosen for Health Education Talks given by Health Visitors to various women's clubs, etc. included "Nutrition for the Family", "Safety in the Home", "The Work of the Public Health Department", "Child Care", "Personal Hygiene", and "Cytology in the early diagnosis and treatment of Cancer". Talks on "Mothercraft" were given by the senior Health Visitor to girls taking part in the Duke of Edinburgh's Award Scheme, also "First Aid and Home Nursing" to British Red Cross Cadets.

HEALTH EDUCATION IN SCHOOLS

Talks and discussions on "Healthy Living", "Growing Up" and "Personal Relationships," were included in the Health Education Programme. The series of talks were given by the Deputy Medical Officer of Health, and Health Visitors to children attending Cavendish, and Ratton Secondary schools and Lindfield E.S.N. School during the Spring Term, and Bishop Bell, Hampden Park Secondary Schools, and Lindfield E.S.N. School during the Autumn Term.

HEALTH EDUCATION AND HOME SAFETY EXHIBITIONS

Designed, prepared and mounted by the Health Education Officer and staff of the Health Education Section.

Care of the Eyes was the subject chosen for our display at the Homes and Trades Exhibition at the Winter Garden held 1st February. Care of the eyes by adequate lighting, correct nutrition, and sight testing was illustrated by the use of models, and the Opticant animated charts. Falls caused through inadequate lighting, and the remedy were also demonstrated.

The Exhibition was visited by 20,460 people.

The Place of the Health Centre in the Eastbourne Urban Development Plan. A small display was mounted and included in the British Medical

Association Exhibition at the Congress Theatre during the week of the British Medical Association Congress held in June.

DENTAL HEALTH

"The cost of fighting dental disease is now more than £95,000,000 per year, and unless the present trend is changed many 1968 babies will be toothless at the age of 12." This statement by the General Dental Council prompted the choice of subject for our exhibition at the Eastbourne Summer Flower Show in August. The two-day show held at the Seaside recreation ground attracted 10,878 people.

HARD OF HEARING

Display material depicting "The bridge of communication" was designed and produced for Miss R. F. McCall, Honorary Secretary of the Eastbourne and District Hard of Hearing Association, for her stand at the Winter Garden "Handicapped Persons" Exhibition in November.

PREVENTION OF ACCIDENTAL POISONING IN HOME AND GARDEN with the caption "Cultivate the Home Safety Habit—It Will Grow!" was the subject for the two-day Autumn Flower Show in November which was attended by 2,022 people.

PIERRE THE CLOWN (Dental Health Education)

With the enthusiastic co-operation of the Head Teachers arrangements were made for Pierre Picton, otherwise known as Pierre the Clown, to visit 3,316 children in fourteen Infant and Junior Schools in Eastbourne.

Pierre's visits to the schools were sponsored by the General Dental Council and the Fruit Producers Council. His talks on dental health lasted for approximately twenty minutes at each school. Pierre demonstrated with a piece of licorice how sweets, cakes and other goods cling to the teeth, causing decay. He then showed how by chewing a piece of apple food deposits were cleared away quickly and effectively. He also showed the children the correct way to use a toothbrush, using an enormous comb and toothbrush.

HEALTH EDUCATION AND HOME SAFETY WINDOW DISPLAYS

The following subjects were displayed in the Hippodrome Theatre box office window: "Anti-smoking", "Lighting and prevention of falls", "Nutrition versus Obesity" (many requests were made by the general public for further information regarding this subject following this particular window display) "Spring-clean with safety", "Prevention of accidental poisoning".

The managers of the SEGAS and SEEBOARD showrooms kindly permitted us to use their valuable window space during the summer for our WATER SAFETY displays.

Health Education and Home Safety projects in Clinics were: "Anti-smoking", "Spring-clean with safety in mind", "Foot Health",

“Immunisation” including Measles vaccination, “Mental Health”, “Girl Guides 50th anniversary”—Helping Others, “Water Safety and prevention of holiday hazards”, “Safety out of doors”, “Dental Health”, “Prevention of accidental poisoning”, “Fireworks, fireguards and safe materials”, “A safe and happy Christmas”.

HEALTH EDUCATION DISPLAY AREAS AVAILABLE IN 1968

Ten individual displays were maintained at approximately four-weekly intervals in the Avenue House Health Centre, Acacia Villa Clinic, Green Street Clinic, Langney Clinic, Hampden Park Clinic, Hippodrome Theatre (except during the Summer season). Posters were accepted and displayed by a number of outside agencies.

Leaflets designed and produced by the Health Education Officer: “Happy Feet for All Ages”, (1) “Feet and Shoes”, (2) “Foot Care”; “Safety at the Seaside” (2,000 of these leaflets were requested for distribution by the Publicity Department); “Cultivate the Home Safety Habit—it will grow” (prevention of accidental poisoning).

Colour Transparencies were taken by the Health Education Officer to bring up to date and more comprehensive the illustrations used when giving talks regarding the work of the Eastbourne Domiciliary Midwives and District Nurses.

16 mm Films. Tape Recordings and Filmstrips were previewed and appraised by members of the Health Department and suitable items purchased for the Department’s Library.

Visitors to the Health Education Section included the Chairman of the Health Services Committee; Health Visitor Tutor from Dundee; Trainee Health Visitor Tutor from Hull, Student Health Visitors; a lecturer in Social Studies; School Teachers and Public Health Inspectors.

During the year records were kept regarding the number, nature of enquiries and requests, apart from our own staff, for information concerning various health subjects. The number of requests totalled 97 from Doctors, Sister Tutors, student nurses, teachers, parents, school children, etc. The Leaflet Library continued to be used for reference purposes.

HOME NURSING

The Superintendent reports:

The year 1968 has once again shown the increasing amount of work undertaken by the Home Nursing Staff. Visits to patients in their own homes increased by 4,918 over the previous year to 70,817, *plus* extra patients seen and treated at the General Practitioners’ surgeries.

In 1967 the Nursing Sisters visited two General Practitioner Surgeries and in 1968 three more surgeries were visited. Where this departure is working successfully, the need for visits to the patients’ homes has diminished. In the New Year it is hoped to commence attaching more of the staff to groups of doctors.

THE ELDERLY IN THE COMMUNITY

There is an increase of patients in the 65 years and over group, especially as the hospital beds continue to be in short supply. The following table will show the main increase of work is on the medical side; it is hoped that in the future greater variety of work will be possible resulting from the closer liaison with the doctors.

<i>Categories of Patients</i>				<i>Visits</i>		
					<i>1968</i>	<i>1967</i>
					<i>1968</i>	<i>1967</i>
Medical	1,817	1,687	Medical	60,000	54,304	
Surgical	305	314	Surgical	9,154	9,653	
Others	172	173	Others	587	546	
Maternal			Maternal			
Complications ..	21	24	Complications ..	105	190	
Infectious			Infectious			
Diseases ..	—	—	Diseases ..	—	—	
			Casual	971	1,206	
	2,315	2,198		70,817	65,899	
Patients in all Categories over 65 years	1,669	1,573				

Session at General Practitioners' Surgeries ..	376
Treatments at ,, ,, ,, ..	1,601
Visits to patients on Hospital Geriatric Waiting List	635

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

Convalescent	527
To hospital	331
Deaths	228
Other causes	603
	1,689

EQUIPMENT

More and more use is being made of "disposables" and pre-sterilised dressings are in regular use. The routine urine test of all new patients when they come on to the books is a preventive measure, and may over the years uncover a few suspicious symptoms which can then be treated earlier. It is hoped to commence a haemoglobin estimation on all elderly patients in the New Year.

TRANSPORT

The number of Local Authority vans remains the same; full use is always made of these, an additional moped has been allocated to the staff and it is hoped that these "bikes" will be replacing the heavier

machines. There remains a small percentage of staff on pedal bicycles, and one who prefers to walk.

STAFFING

There has been the usual turnover of staff, three nurses leaving and five joining the service. Three additional part-time Nursing Auxiliaries commenced during the year and are now working to a much greater extent within the team. These staff are most helpful in covering routine nursing care.

A new departure during 1968 was the addition of a part-time S.R.N. to cover late injections, treatments and calls after normal working hours. This appointment proved a need which has required a further part-time S.R.N. appointment in December. These evening hours are very suitable for married women with children who wish to continue to make full use of their professional training.

STAFF TRAINING

Two district nurses attended Post-Graduate Courses and both found them of benefit and giving additional interest to their work.

A senior District Nurse attended a special Teaching Course at the William Rathbone Staff College, Liverpool, and has found it most helpful in the "In-Service" training programmes for the Nursing Auxiliaries and Night Sitters and tutorials for the S.E.N., training for the District.

The Deputy Superintendent District Nurse, attended a Middle Management Course at the William Rathbone Staff College for three months. This he found very stimulating and it is hoped some new and improved ideas will be put into practice in the New Year.

STAFF SICKNESS

The early Spring was a bad period for sickness amongst the Staff and the establishment was stretched to its limit, fortunately several retired nurses were able and willing to help and the part-timers worked extra hours. We were most grateful to them. Bronchitis and influenzal colds affected the Staff as much as the general public and thereby adding to the difficulties.

APPRECIATION

The Staff have appreciated the help and advice they have obtained from Mrs. Robertson, Occupational Therapist. The Geriatric Health Visitors and other Welfare Workers continue to have good liaison with the Staff.

Our thanks are again due to the St. John's Ambulance Brigade for their continued help in conveying messages and help in moving and lifting very heavy patients, and to clerical, nursing and transport staff for loyal support.

VACCINATION AND IMMUNISATION DURING 1968

A—Smallpox Vaccination

	<i>Primary Vaccination</i>		<i>Re-vaccination</i>	
	<i>By Staff of Health Department</i>	<i>By General Practitioners</i>	<i>By Staff of Health Department</i>	<i>By General Practitioners</i>
Under 1 year	—	23	—	—
1-2 years	191	170	—	1
2-5 years	28	37	2	7
5-15 years	—	13	1	96
	219	243	3	104
	462		107	
	569			

B—Diphtheria Immunisation

The age groups and numbers immunised were:

<i>Year of birth</i>	<i>By medical staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
1968	3	16	19
1965-1967	131	141	272
1961-1964	24	1	25
1960-15 years	3	2	5
	—	—	—
	161	160	321
	—	—	—

REINFORCING DOSES

The age groups and numbers were:

<i>Year of birth</i>	<i>By medical staff of the Department</i>	<i>By General Medical Practitioners</i>	<i>Total</i>
1965-1967	8	56	64
1961-1964	645	175	820
1960-15 years	17	35	52
	—	—	—
	670	266	936
	—	—	—

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

C—Whooping Cough Immunisation

Year of Birth	By Medical Staff of the Department		By General Practitioners		Totals	
	Primary	Reinforcing	Primary	Reinforcing	Primary	Reinforcing
1968	3	—	16	—	19	—
1965-1967	131	8	138	54	269	62
1961-1964	22	493	1	126	23	619
1960-15 years	2	4	—	14	2	18
Totals	158	505	155	194	313	699

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

Year	Cases notified		
1964 20
1965 2
1966 8
1967 1
1968 3

D—Tetanus Immunisation

Year of Birth	By Medical Staff of the Department		By General Practitioners		Totals	
	Primary	Reinforcing	Primary	Reinforcing	Primary	Reinforcing
1968	3	—	16	—	19	—
1965-1967	131	8	141	62	272	70
1961-1964	24	644	8	186	32	830
1960-15 years	12	243	37	76	49	319
Totals	170	895	202	324	372	1,219

E—Vaccination against Poliomyelitis

Year of Birth	By Health Department	By General Practitioners Completed Courses
1960-15 years	28	12
1961-1964	26	14
1965	2	4
1966	7	5
1967	130	116
1968	5	17
Totals	198	168

In addition 1,931 booster doses were given to children at sessions held in the Local Authority schools, and 264 booster doses were given to children by medical practitioners.

THE EASTBOURNE AMBULANCE SERVICE

The Chief Ambulance Officer reports:

Once more it is a pleasure to report that the Eastbourne Division of the St. John Ambulance Brigade has continued to operate the Eastbourne Ambulance Service on behalf of Eastbourne's Local Health Authority and the seven surrounding parishes of the East Sussex County Council.

Increasing demands are still being made upon our services and consequently the amount of work undertaken by the Service is steadily increasing.

In keeping with larger Ambulance Services throughout the country, the Eastbourne fleet of ambulances has now been equipped with blue flashing lights in the middle of the front grilles. These are in addition to the normal blue flashing beacons on the top of the vehicles and thus enables motorists looking through their interior mirrors to see that they are being followed by an ambulance. Our vehicles are then given the "right of way" more freely when proceeding on emergency calls.

At present we are in the process of trying out a "Sussex Resuscitator" on one of our accident ambulances. This is a hand-operated "kiss of life" appliance, quite portable and simple to use. This obviates personal mouth to mouth resuscitation which in some cases, can be a little unpleasant for the Attendants.

When the tanker *Sitakund* went aground off Eastbourne in October, the Ambulance Service was alerted but I am happy to say our services were not required.

The year 1968 was a sad year for us in that it saw the passing away of our former Ambulance Officer, Mr. A. J. Burnage. His death was a sad loss to the community and surely a token of this must have been his funeral when the church was packed to absolute capacity with his colleagues and friends of many years.

Thanks to the support of full-time personnel and the Brigade volunteers we have been able to man the Night Ambulance Service on a completely voluntary basis, thus effecting a large saving in operational costs. Unfortunately, this task is becoming increasingly difficult year by year. It is interesting to note that on an average we answer some 50-60 calls per month during the hours of 10 p.m. and 7 a.m.

I am happy to be able to conclude this report on a cheerful note brought about by our Annual Inspection. Yet again Eastbourne was highly commended for its grand turn-out of vehicles and personnel.

AMBULANCE SERVICE
PERSONS CARRIED AND MILEAGES, 1964-1968

Year	EASTBOURNE						EAST SUSSEX						Totals	
	Ambulance		Sitting cases		Training Centre (DPV)		Ambulance		Sitting cases		Training Centre (DPV)		Persons	Miles
	Persons	Miles	Persons	Miles	Persons	Miles	Persons	Miles	Persons	Miles	Persons	Miles		
1964	7,375	37,412	17,230	57,979	11,048	13,549	984	9,159	4,656	24,792	1,886	4,817	43,179	147,708
1965	8,008	40,036	16,119	55,925	13,443	16,393	1,117	9,487	4,547	24,374	2,064	4,092	45,298	150,309
1966	8,041	38,892	16,027	55,386	11,006	16,821	1,247	9,870	4,890	26,148	2,530	4,100	43,741	151,217
1967	8,207	40,801	19,287	64,226	10,500	16,604	1,095	9,561	5,170	27,005	2,852	4,400	47,111	162,597
1968	8,093	38,418	18,684	57,756	10,586	15,883	1,273	10,953	6,172	33,348	2,573	4,460	47,381	160,818

The service is called upon to convey a large number of patients to and from the local railway station.

In the year under review 273 patients were transferred by rail.

ORIGIN OF CALLS
(EASTBOURNE AREA ONLY)

<i>Origin of Calls</i>	<i>Ambulances</i>				<i>Sitting Case Cars</i>					
	1964	1965	1966	1967	1968	1964	1965	1966	1967	1968
Emergency calls and street accidents ..	1,176	1,123	1,295	1,523	1,542	39	35	45	45	47
Local Hospitals ..	2,707	2,782	2,888	2,572	2,509	1,230	1,221	1,188	1,157	1,009
Local Convalescent Homes ..	—	—	5	1	2	—	4	9	4	—
General Medical Practitioners ..	1,182	1,247	1,189	1,279	1,495	456	576	532	477	436
Maternity Homes ..	40	95	114	224	213	4	15	10	16	9
Nursing Homes ..	74	93	108	100	92	13	36	12	18	6
Ministry of Pensions ..	27	26	48	22	31	263	233	250	292	200
Other Ambulance Authorities ..	88	84	70	47	38	183	148	116	77	76
Mental Welfare Officers ..	15	19	22	20	28	20	77	19	409	414
Others ..	192	200	234	186	172	106	178	197	508	159
Out-Patients:										
Chest Clinic ..	155	137	158	164	210	339	298	358	317	315
Foot Clinic ..	—	—	—	2	20	545	824	1,131	1,369	1,485
Local Hospitals ..	1,631	2,028	1,852	1,973	1,604	11,997	10,599	9,920	12,775	12,238
Royal Sussex County Hospital, Brighton ..	88	174	58	94	137	2,035	1,875	2,240	1,823	2,290
Total Calls ..	7,375	8,008	8,041	8,207	8,093	17,230	16,119	16,027	19,287	18,684
Mileage ..	37,412	40,036	38,892	40,801	38,418	57,979	55,925	55,386	64,299	57,756

CARE AND AFTER CARE SERVICES

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 Recuperative Holidays

During the year eighteen persons were sent on recuperative holidays at a cost to the Authority of some £400. The beneficiaries fall into two main categories: those who have successfully overcome illness but need a period of rest to recuperate and those who need a break from an intolerable situation to prevent either physical or mental breakdown. The Department may arrange and finance the entire holiday including travelling expenses or, alternatively, may make all arrangements but pay only for accommodation or travelling. Help is given to approved cases usually on the recommendation of the general medical practitioner.

C—Loan Equipment

The Loan Equipment Service, as is to be expected with the increase of work on the Home Nursing side, has also increased, especially for nursing aids for the very sick patient, such as air rings, bed pans, back rests, commodes. The equipment stock has gradually been added to over the year but difficulty is experienced in not having adequate storage space.

Rehabilitation equipment such as tripod walking sticks, toilet frames, raised toilet seats, elbow crutches have been considerably more in demand. It is rarely possible to have sufficient stock of Zimmer walking aids, as this equipment is on hire for long periods.

Protective clothing has shown an increase in demand. There are probably two reasons for this, one, the public have a better knowledge of the services available and secondly the previously bed-bound patient is helped to get up in a chair rather than lying in bed all day.

Wheelchairs continue to be a problem to satisfy the numerous calls for them, the lightweight wheelchair is required more frequently and the difficulty of keeping up supplies in the summer increases. During the winter months the same applies to the situation with regard to commodes.

The figures below indicate the growth of the Services:

<i>Year</i>	<i>Articles loaned</i>	<i>Number of Patients</i>	<i>Articles loaned free of charge</i>
1962	617	387	73
1963	723	522	106
1964	768	610	125
1965	924	701	150
1966	1,218	752	200
1967	1,506	871	219
1968	1,548	1,006	257

<i>Type of Equipment</i>	<i>Stock held 31.12.68</i>	<i>No. of times issued in 1968</i>
Air rings and Sorbo rings ..	51	156
Arthritic ejector chair	1	4
Back rests	19	122
Bath rails	12	16
Bath boards	8	6
Bath seats	30	50
Bed pans	29	158
Bed pans (rubber)	9	5
Bed tables	3	3
Bed sides	1 pair	2
Bedsteads	8	14
Bed lifts	3	—
Bed rails	1 pair	1
Blankets	42	3
Commodes	43	265
Deck chairs	2	1
Elbow and wooden crutches ..	23 pairs	41
Feeding cups	25	20
Fracture boards (large and small) ..	33 sets of 3	28
Leg cradles	16	66
Mackintosh sheets	45	126
Mattresses (hair and flock) ..	6	11
Mattresses (Sorbo and Dunlopillo)	12	8
Pillows (Dunlopillo)	2	2
Pillows (feather)	5	6
Pillowcases	24	16
Pulley (floor standing)	5	12
Pyjamas	6 pairs	—
Sheets (cotton, single)	15	18
Sheets (cotton, draw)	13	1
Sheets (flannelette)	4	—
Sputum mugs	17	2
Toilet aid frames	11	25
Toilet (Elsan)	5	3
Toilet seats (inflatable)	4	3
Toilet seats (raised)	13	21
Towels (huckaback)	32	—
Towels (Turkish)	13	—
Tripod walking sticks	11	27
Urinals	39	119
Wheelchairs	19	92
Zimmer walking aids	54	93

There are certain items of equipment which have been given to the Department at various times. These are issued free of charge.

D—Voluntary Organisations

As mentioned in my previous reports there is a high level of voluntary activity in the town which supplements the statutory functions of the Local Authority and provides services outside the scope of the Council.

The specific services rendered by the voluntary bodies are enumerated elsewhere in this report but I would like to acknowledge the services rendered by the W.R.V.S., the Order of St. John, the British Red Cross, the Guardianship Society and N.S.P.C.C., the National Association for the Parents of Mentally Handicapped Children and other local and national organisations.

E—Family Planning Service

The Authority makes grants and payments in respect of the work of the Clinic on behalf of Eastbourne residents totalling approximately £500 per annum, and in addition supplies accommodation with ancillary services and some equipment for use in the clinic.

Sessions are held on Thursday afternoons and evenings and Monday afternoons. A local authority Medical Officer attends the Monday I.U.D. Clinic by arrangement with the Family Planning Clinic. Again in conjunction with the authority a domiciliary service is provided for mothers who cannot readily attend the clinic.

The Hon. Secretary reports as follows:

Total New Patients: 530 of whom 314 were from Eastbourne.

County Borough of Eastbourne Grant. Our medical staff recommended 58 Eastbourne patients to be assisted by this Grant.

Domiciliary Service. The total patients seen were 60, of whom 10 were new patients. Total visits made, 136. Pregnancies 1 (in a patient who refused help, but accepted after delivery).

On the Problem Family Register there are 26 mothers who have received domiciliary Family Planning help. The pregnancy rate is therefore nil, compared with a 9 per cent. unwanted pregnancy rate in the 54 problem family mothers who have *not* received domiciliary Family Planning help.

General Remarks. This Clinic now employs four doctors, and four nurses, all specially trained for Family Planning service. In addition, there is a part-time paid Clinic Organiser, as well as twenty voluntary Lay-workers, of whom four are needed to man each Clinic session.

During 1968 there have been 102 Clinic sessions on Thursday afternoons and evenings weekly, and 49 I.U.D. sessions on Mondays. The Thursday evening sessions employ two doctors and two nurses, and the Thursday afternoon sessions, one doctor full-time, and a second doctor half-time, as well as two nurses. The I.U.D. sessions employ one doctor and one nurse.

A Marital Difficulty session is held once monthly on the third Thursday morning, and is run by the Sussex County Branch, Family Planning Association, the Marital Difficulty session being one of two such clinics covering East and West Sussex respectively.

F—Sitter-in Service

The year 1968 again shows how important the Night Sitting Service is to the patients, relatives and Nursing Staff. We are very fortunate in having a number of ladies so willing to help out on an occasional basis, they have always helped loyally, many times at very short notice and have sat up at night, often in most uncomfortable circumstances.

In November, In-Service Training was arranged for the night sitters and auxiliaries by the senior nurse, giving a short overall picture of the basic nursing care and types of illnesses they might encounter during their work; this is followed up with a talk by other members of the Health Team every two months, so giving the night sitter a place as an important member of the Health Team.

From the Table below the continual increase in the work during the night emphasises the fact that relatives cannot nurse day and night continuously and help is required until a hospital bed is available or the patient dies and also many patients in Eastbourne are living entirely alone.

	1965	1966	1967	1968
Households	85	97	138	141
Nights	380	279	426	453
Days	154	39	105	50
Number of sitters used ..	25	20	15	18
Private nurses used ..	3	1	1	—

We again made use of the Marie Curie Night Nursing Service for patients suffering from various forms of malignancy and are very grateful for this Service.

G—Tuberculosis

NOTIFICATION REGISTER

	Respiratory		Non-Respiratory		Total	
	Males	Females	Males	Females	Males	Females
ON REGISTER						
1st January, 1968 ..	178	124	15	16	193	140
<i>Add:</i>						
Notifications ..	3	1	—	2	3	3
Transfers ..	5	6	—	1	5	7
Posthumous Notifications ..	1	—	—	—	1	—
Found on Death Return ..	—	—	—	—	—	—
	187	131	15	19	202	150
<i>Less:</i>						
Deaths	1	—	—	2	1	2
Left Town	5	—	—	—	5	—
Arrested	7	3	—	—	7	3
	13	3	—	2	13	5
ON REGISTER						
31st December, 1968	174	128	15	17	189	145

AGE GROUPING OF NEW CASES

Age Groups	Respiratory		Non-Respiratory		Total	
	Males	Females	Males	Females	Males	Females
0-5	-	-	-	-	-	-
5-10	-	-	-	-	-	-
10-15	-	-	-	-	-	-
15-25	-	1	-	-	-	1
25-45	2	-	-	1	2	1
45-65	1	-	-	-	1	-
Over 65	-	-	-	1	-	1
	3	1	-	2	3	3

The Registrar General's return of causes of death indicates that there were no deaths from tuberculosis in 1968.

Extra nourishment granted to persons suffering from tuberculosis:

Liquid milk—

Quantity supplied	5,257 pints
Number of cases assisted	18

B.C.G. VACCINATION

This work is undertaken by the school medical and nursing staff of the department for school children over 13 years and for pupils at Further Education establishments and by the Chest Physician in respect of persons who are known contacts of tuberculosis.

Number of persons vaccinated are as follows:

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

Age groups—

Under 5 years	22
5-15 years	15
Over 15 years	6

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

(i) Number skin tested	554
(ii) Number found negative	538
(iii) Number vaccinated	538

C—STUDENTS ATTENDING FURTHER EDUCATION ESTABLISHMENTS

(i) Number skin tested	29
(ii) Number found negative	20
(iii) Number vaccinated	20

MASS RADIOGRAPHY

The East Sussex Mass Radiography Unit under the direction of Dr. B. G. Rigden paid regular visits to Eastbourne for the prime purpose of examining patients referred by general practitioners. New staff of Local Authority Departments were asked to attend for X-ray if the scrutiny of their completed medical statement form indicated it, as were other employees medically examined for other purposes.

Reproduced below is an extract from the Annual Report for 1967 of the Mass Radiography Unit which gives an indication of the work done by the Unit within the County Borough area. 1968 figures are not yet available.

	No. of Visits	Numbers examined			Findings																											
		Male	Female	Total	T.B. requiring treatment or close clinic supervision			T.B. requiring occasional clinic supervision			Bronchial Carcinoma			All other abnormalities			Total abnormalities															
					M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.													
Doctors Referrals	11	326	398	724	3	2	5	2	1	3	3																					
Other Examiners	17	2,058	2,735	4,793	3	3	6	2	2	4	4			4																		
Total	28	2,384	3,133	5,517	6	5	11	4	3	7	7			7																		

H—Chiropody Service

The Local Authority operated chiropody service commenced operation in 1960. Since that time it has shown a steady growth rate which is more precisely indicated by the table printed below. This is an important service because it not only relieves pain but enables a fuller life to be enjoyed once mobility is restored.

Apart from the regular sessions held at Clinics and Old People's Homes domiciliary visits were also arranged. Transport to Clinics was provided in certain cases. The elderly and handicapped are the main recipients of the service, although school children received treatment when necessary. The standard charge remained unchanged at 9s. for two feet and 6s. for one foot treated. The majority of patients are eligible for free treatment. The remainder are either assessed to pay according to their means or elect to pay the full charge.

There is of course no charge for the residents of the Authority's Homes or for school children. Of the number of cases treated, assessments were as follows:

Free to scale	767
Scale charge	7
Full Cost	422
Special cases—	
Free	—
Charged	—
Total at December, 1968	1,196*

*577 of whom were in receipt of Social Security supplement

Year	At Authority Clinics						Schoolchildren	Old Persons Homes	Chiro-podists employed	
	Aged Persons					No. treated				No. of treatments
	No. on books at 31st Dec.	Increase on previous year	New Cases in year	No. of treatments given in year (incl. Dom.)	No. of Clinic sessions (excl. Dom.)		Domi-ciliary visits			
1960	300	—	—	—	—	—	—	—	—	
1961	400	100	150	2,293	347	100	80	173	86	1.0
1962	450	50	160	2,621	391	126	44	126	57	1.0
1963	550	100	180	2,960	458	145	32	111	78	1.2
1964	633	83	181	3,062	525	170	20	76	71	1.2
1965	741	108	315	4,282	659	272	27	128	103	2.0
1966	896	155	238	5,222	727	399	42	206	97	2.0
1967	1,048	152	317	6,102	834	504	38	117	131	2.5
1968	1,196	148	371	6,464	894	650	32	119	145	2.5

I—Incontinence Pads Service

The increasing number of aged persons in the area requiring community care is also indicated by an increase of over 50 per cent in the total of incontinence pads issued in 1968 compared with the previous year.

PADS ISSUED

1964	..	..	1,200
1965	..	..	2,000
1966	..	..	2,946
1967	..	..	6,016 plus 37 protective garments
1968	..	..	9,204 plus 39 protective garments

Incontinence pads are issued from the Department on the recommendation of the nurse or general practitioner.

DISPOSAL

In the majority of instances disposal is effected within the confines of the home. Where there are excessive numbers of pads for disposal or grossly soiled pads, arrangements are made by the department for their collection and disposal at the Refuse Disposal Works.

J—Laundry Service for Incontinent Patients

This service has now been in existence for six years. During this time the demand has risen from 3,022 articles in 1963 to 20,246 in 1968. The increase is partly due to the extension of the service to include three of the Old People's Homes where it is proving to be of extreme value in view of the increasing number of incontinent cases in the Homes.

HOME HELP SERVICE

The Home Help Organiser reports:

The trend in increased demand for the services of a Home Help continued throughout the year, and there was a sharp increase in the number of elderly people requiring daily attention. This situation coincided with a decline in the recruitment of suitable Home Helps.

In a service which calls for good quality workers of understanding personality there must always be difficulty regarding recruitment, particularly in a town where local industries absorb a good deal of part time labour, but it is hoped that inducements in the form of fringe benefits in the coming year will help considerably in the matter. It is possible that we shall need to look in other directions for suitable helpers, *i.e.* women with children who need to have school holidays at home, younger people (we have already engaged several much younger people with some success) and possibly men of earlier retirement age. For the present we have a good band of older women who have served the department most loyally for many years, supplemented by those who stay in the work for a few months at a time.

It has never been necessary to leave any urgent case without help but unfortunately many have had to manage with less time than really needed in order to meet emergencies. It is interesting to note the increase in those able to pay the standard charge, reflecting the difficulty of obtaining private help.

The following tables provide an indication of the work performed during the year:

	1964	1965	1966	1967	1968
No. of cases assisted	647	708	787	823	885
Average hours help per case per annum	86.5	86.4	93.4	84.7	75.4
No. of hours worked by Home Helps	55,985	57,184	66,101	71,161	66,735
No. of part-time Helps as at 31st December	47	55	63	64	55
Average equivalent Whole-time Home Helps employed for year	25.5	26.2	32.32	33.54	32.08

CATEGORIES OF PATIENTS

<i>Categories of Patients</i>	<i>Totals</i>				
	<i>Under 65</i>	<i>Over 65</i>	<i>1968</i>	<i>1967</i>	<i>1966</i>
Chronic sick and Tuberculous ..	59	680	739	686	646
Mental Illness	2	7	9	10	6
Maternity	23	0	23	38	31
Others	74	40	114	89	104
	158	727	885	823	787

DETAILS OF CHARGES

	<i>1968</i>
Standard charge. Voluntary or assessed ..	404
(Persons at or below Supplementary Assistance Level). No charge made ..	460
<i>Special Cases of Hardship—</i>	
Assessed to pay reduced charge ..	89
Free	32
	885

MENTAL HEALTH SERVICE

General

During the year considerable changes have taken place in the internal administration of the service. The main changes are that the Mental Health and Welfare Sections, hitherto integrated under a joint heading, have become largely separated one from the other, and an administrative assistant has been seconded from the Management Services Section to co-ordinate the work of both Sections. The new arrangement will undoubtedly provide a basis for a much more effective service in both fields.

Community Care

The number of patients admitted to hospitals from the Eastbourne administrative area during 1968 with the active assistance of the Mental Welfare Officers, increased from 56 in 1967 to 77 in 1968. However, there is little change in the overall number of persons undergoing in-patient treatment. The Department's officers only deal with a proportion of the admissions, many entering hospital informally without their help. Similarly, the number of new referrals and attendances at the Out-Patient Clinic has not varied significantly over the previous year.

Supportive care to persons "at risk" in the community and following discharge from hospital has continued actively throughout the year and participation in the running of the Out-Patient Clinic, whence many of these patients are referred for care, has been to the mutual benefit of the patient and the Local Authority and Hospital Staffs. It should also be recorded that officers have attended frequent clinical meetings at Hellingly Hospital and a week-end seminar held there, to which they were invited.

"The Yews" Hostel has remained almost full throughout the year. Of the thirteen women in residence at the end of 1968, ten were usefully occupied, either in normal employment or at the Salehurst Road Training Centre. The remaining three are all elderly and, vacancies permitting, would probably be transferred to Welfare type accommodation.

There is little change to report with regard to the Mentally Subnormal and Severely Subnormal. It is encouraging, however, to note that the potential of this type of patient, hitherto largely undeveloped, is now being realised to a greater degree. As a result, the amount of useful effort now gained from them, either in normal employment or at the Salehurst Road Centre, is most satisfactory and of importance to patients and community alike. As the benefits of the early training received at Hazel Court Junior Training School are felt by those coming up to "school-leaving age", it is certainly to be anticipated that this trend will continue and improve.

Thanks must be rendered to our neighbouring Authority, East Sussex County Council, for their co-operation in the many activities in which, in the field of mental health, we jointly take part. Thanks also to the Consultants and staff of Hellingly Hospital for their share in establishing closer links with us. Commendation is also due to the Police who, on those occasions when the law requires their presence for the purpose of entering premises in connection with Section 135 of the Mental Health Act, always prove both tactful and helpful.

Finally, a special mention should perhaps be made of the work of the Society for Mentally Handicapped Children, whose local branch has shown such great interest in the activities of the Training Centres and whose beneficence in providing items for the Centres which supplement equipment provided from official funds is fully appreciated, not least by the staffs of the Centres.

Mental Illness

HOSPITAL CARE

<i>Mental Health Act, 1950</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Section 5 (informal)	5	23	28
Section 25 (Observation, 28 days) ..	9	26	35
Section 26 (Treatment)	3	3	6
Section 29 (Observation in Emergency, 3 days)	3	5	8
Section 135 (Justices Warrant: Place of Safety, 72 hours)	—	3	3
	20	60	80
	—	—	—

DISPOSAL OF PATIENTS

<i>Hospital</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Hellingly	19	51	70
St. Mary's, Eastbourne	—	1	1
Amberstone	1	4	5
St. Francis	—	1	1
	20	57	77
	—	—	—
	<i>1967</i>	<i>1966</i>	<i>1965</i>
TOTALS IN PREVIOUS YEARS ..	56	55	54
			<i>1964</i>
			52

In addition to the 77 patients admitted to hospitals during 1968, seven persons were returned from leave of absence by the Mental Welfare Officers at the request of the hospital authorities.

Care and After Care

27 males and 96 females were referred to the department's officers for supportive care. Including cases continuing from the previous year, a total of 49 men and 115 women received care.

"The Yews" Hostel for Women

In residence 1st January, 1968	10
Admitted during year	8
Discharged—	
To private accommodation	2
To residential employment	2
To psychiatric hospital	1
In residence at end of year	13

THE SUBNORMAL AND SEVERELY SUBNORMAL

Males

Five new cases were notified, all having moved into the area.

Four were removed from the Register, one having died and three having left the area.

Females

One new case was notified, having moved into the area. Three cases were removed from the Register, one having left the area and two having died.

Position at the end of 1968

	<i>Males</i>	<i>Females</i>
In hospitals and homes	50	31
In hospitals and homes at Local Authority expense	3	3
In the care of the Guardianship Society at Local Authority expense	—	4
Under supervision	47	46
	—	—
	100	84
	—	—

Of the 93 cases under supervision in the community, 16 males and 12 females are in outside employment.

Hospital Waiting List

No patient was on the waiting list for permanent care at the end of the year.

Short-Term Care

Seven patients were received into short-term care during the year, two into hospital, one to the Guardianship Society, two to Hazel Court Hostel and two to accommodation provided under Part III of the National Assistance Act.

Training Centres and Hostels

	<i>Days Open</i>	<i>Total Attendances</i>	<i>On Register at 31.12.68</i>		
			<i>Eastbourne</i>	<i>East Sussex</i>	<i>Other Authorities</i>
Salehurst Road (Adult Centre)	228	5,376	20	11	—
Hazel Court Junior Training School	194	9,864	26	31	1
Hazel Court Hostel	193	2,399	6	7	—

HAZEL COURT JUNIOR TRAINING SCHOOL

Report of the Principal, Miss E. Burns

The year 1968 has shown continuing progress and development.

We have been experimenting with the "Language Master" machines all throughout 1968. We now have five of these which were donated by friends of the school, and so have been able to include each

group in the experiment. We have concluded that they are useful in providing stimulus for the timid non-talker and whisperers, and the ability to operate them is giving a tremendous boost to self-confidence, and stretching the concentration span.

The Mayor and Mayoress (Councillor and Mrs. C. G. Scott) attended the Sports Day, as did many other distinguished visitors—some from the sphere of education who were most warm in their praise of the standard reached in the varied events.

A special feature of 1968 were our class educational outings:

Eastbourne Fire Station: We took three different groups on this outing which was a tremendous success from the point of providing stimuli for speech conversation and general knowledge. I feel I must pay tribute to the members of the Fire Brigade, who really put themselves out to the extreme, in demonstration work for the children's benefit. The children reciprocated with "Thank You" letters and paintings of the Fire Station, duly delivered to the firemen staff.

Farm Visit: To discover where the milk we are so fond of, comes from, the children watched the milking process, and also toured the farm animals in pens and fields, etc. Here again we had good co-operation from a farmer at Herstmonceux.

South Coast Dairies, Milk Depot: As a follow-up to the farm visit we were able to go to the South Coast Dairies in Eastbourne in two separate parties. Here again the hospitality and efforts on the part of the staff to break down the information to the children's level of understanding, was really wonderful. The visit did much to widen the interest and quicken the general awareness of life within the community.

Train Outing to Normans' Bay by Class 1. The aim of which was to discover other means of transport as different from "Daddy's car", and to learn proper community behaviour on public transport. Once more, we found that public servants were only too willing to co-operate.

We are extremely grateful to all these busy people for their gracious co-operation.

EASTBOURNE WORK AND OCCUPATION CENTRE

Report of the Manager, Mr. G. E. Townsend

After the winter holiday, 1968 commenced with 28 trainees on the register. During the year this number increased to 32 which included an intake of 2 trainees from Hazel Court Junior Training Centre.

Part of their training continued on similar lines to that used at Hazel Court and with the gradual introduction of an adult atmosphere, these two trainees quickly settled down and are now very usefully trained and employed at Salehurst Road.

Industrial work for Armour Pharmaceutical Company continued and during the year 271,500 units of work were completed and it is interesting to note that 90 per cent of this work was exported worldwide.

Depending on the type of work available, as many as 25 trainees received payment in one week.

During this period, a more intricate type of work was undertaken and this proved to be of great assistance for the improvement of concentration.

Carpentry continued three mornings each week. A large number of folding bath seats were produced for use in hospitals, Homes for the Elderly Citizens and by the Home Nursing Service.

Three trainees were instructed in the repair of upholstery with very good results. Such items as office chairs and waiting room settees were renovated in rexine and leather.

Cooking on the premises during the closure of the School Meals Service proved beneficial to the young lady trainees who assisted in the kitchen.

In general, the health of all trainees and staff was exceptionally good, and I am of the opinion that 1968 was a good year for the Adult Occupation/Training Centre.

SECTION C

WELFARE SERVICES

Once again the need of the elderly is the pressing problem in all fields of Welfare, and the statement that our percentage of persons of pensionable age is the highest of any Local Health Authority in the country has not been challenged.

All members of the Section and in particular those in contact with the public, carry on their duties considerably frustrated by the deficiency in facilities such as residential accommodation, meals on wheels, home helps, etc. These deficiencies in the service arise substantially from the current era of national financial stringency and the difficulty in recruiting and retaining suitable staffs, particularly home helps and in our residential establishments.

Mention was made in the last report of inadequate interview facilities, as a result of alterations at the office these have to some extent been improved.

Geriatric Services

(a) *Residential.* At the time of compiling this report, Firwood House, Brassey Avenue, the latest purpose-built Home has opened to receive residents. It is some indication of the staffing problem that due to deficiency the full quota of residents could not be accepted three months after opening. Once again one notes that despite the new Home the urgent waiting list remains at a very high figure.

The story of frailty and infirmity in residents continues. Tribute must once again be paid to all staff and in particular senior officers. There is no question that the work is not exacting and at times distasteful. I am afraid it must be accepted that some at least of the residents cannot be described as "dear old souls".

In order to concentrate problems and help the residents in other Homes, it is proposed for the current year to place the senile confused and anti-social cases in one Home. A report on this will be submitted in due course.

(b) *Day Centre.* The day centre provided in conjunction with Firwood House is due to open at the end of August of the current year. It is hoped that this will provide relief for some hard-pressed relatives and indeed to some elderly persons waiting for permanent admission.

(c) *Community.* It is regretted that the proposed handicapped centre remains in the schedule of schemes not identified with a particular year. However, at the time of writing this report there are once again possibilities of a site, and one can only hope that this may come to fruition.

The Social Workers including the Geriatric Health Visitors continue to keep a watch on the "at risk" cases and to cope with the many problems associated with old persons in their own home. While appreciation must be expressed of the unselfish and devoted care of many relatives, it must also be admitted that there are some who are only too keen to unload all their responsibilities and problems on the hard-pressed welfare officer.

Residential Accommodation—Section 21 (i) (a) (National Assistance Act 1948)

Figures for the year were as follows:

1. CAVENDISH LODGE (26 beds)

	<i>Men</i>
On 31st December, 1967	26
Admitted during the year	13
Discharged during the year	11
Died	3
On 31st December, 1968	25

2. TREVIN TOWERS (45 beds)

	<i>Men</i>	<i>Women</i>
On 31st December, 1967	9	36
Admitted during the year	11	27
Discharged during the year	9	22
Died	2	5
On 31st December, 1968	9	36

3. STAVELEY COURT (57 beds)

	<i>Women</i>
On 31st December, 1967	54
Admitted during the year	40
Discharged during the year	26
Died	13
On 31st December, 1968	55

4. ST. ANTHONY'S COURT (50 beds)

	<i>Men</i>	<i>Women</i>
On 31st December, 1967	10	38
Admitted during the year	20	35
Discharged during the year	17	30
Died	2	5
On 31st December, 1968	11	38

5. WILLOUGHBY COURT (50 beds)		<i>Men</i>	<i>Women</i>
On 31st December, 1967	.. .. .	11	37
Admitted during the year	.. .. .	13	35
Discharged during the year	.. .. .	12	27
Died	.. .. .	2	6
On 31st December, 1968	.. .. .	10	39
6. PARKER HOUSE (57 beds)	.. .. .	<i>Men</i>	<i>Women</i>
On 31st December, 1967	.. .. .	6	48
Admitted during the year	.. .. .	4	36
Discharged during the year	.. .. .	4	31
Died	.. .. .	1	2
On 31st December, 1968	.. .. .	5	51
7. VOLUNTARY HOMES		<i>Men</i>	<i>Women</i>
Salvation Army Home, Hassocks	.. .. .	-	1
Salvation Army Home, Westgate	.. .. .	-	1
Royal Hospital and Home for Incurables	.. .. .	-	1
Papworth Village Settlement	.. .. .	1	-
The Dell, Oulton Broad	.. .. .	-	1
Grosvenor House (Crossways Trust)	.. .. .	1	2
Sussex House, St. Leonards-on-Sea	.. .. .	1	1
Chalfont Colony	.. .. .	-	1
St. Joseph's Convent, Brighton	.. .. .	-	2
Bernard Baron Homes	.. .. .	1	1
Greenway Methodist Home	.. .. .	-	2
Holy Cross Priory	.. .. .	-	2
W.R.V.S. Home, Croxley Green	.. .. .	-	1
British Legion Home, Brecon	.. .. .	1	-
Royal Alfred Ladies Home	.. .. .	-	1
Kings Down, Hadley Green	.. .. .	1	1
Ardath, Bexhill-on-Sea	.. .. .	-	1
Nazareth House, Bexhill-on-Sea	.. .. .	1	1
Searchlight Cripples, Newhaven	.. .. .	1	-
Callow Brook, Birmingham	.. .. .	-	1
Yatley Industrial	.. .. .	-	1
Westminster House, Teddington	.. .. .	1	-
Elim Eventide Home	.. .. .	-	2
Seven Springs Cheshire Home	.. .. .	-	1
Also resident during period:		<i>Men</i>	<i>Women</i>
Searchlight Cripples, Newhaven	.. .. .	1	-
W.R.V.S. Oaklands, Hove	.. .. .	-	1
Eothen Homes, Sutton	.. .. .	-	1
St. Elizabeth's, Seaford	.. .. .	-	1
Sussex House, St. Leonards-on-Sea	.. .. .	1	-
Holy Cross Priory, Ascot	.. .. .	-	1
Merlyn House, Southampton	.. .. .	1	-
W.R.V.S., Crabhill, Redhill	.. .. .	-	1
Seven Springs Cheshire Home	.. .. .	-	1
Bernard Baron Cottage Home	.. .. .	1	-
David Lewis Colony	.. .. .	1	-

8. OTHER LOCAL AUTHORITY HOMES			<i>Men</i>	<i>Women</i>
London Borough of Camden	..	..	—	1
East Sussex County Council	..	..	—	1
9. RESIDENT DURING THE YEAR			<i>Men</i>	<i>Women</i>
Surrey County Council	..	..	—	1
Berkshire County Council	..	..	—	1
10. RESIDENT IN VOLUNTARY HOMES DURING THE YEAR			<i>Men</i>	<i>Women</i>
Searchlight Cripples, Newhaven	..	..	1	—
W.R.V.S., Oaklands, Hove	..	..	—	1
Eothen Homes, Sutton	..	..	—	1
St. Elizabeth's, Seaford	..	..	—	1
Sussex House, St. Leonards-on-Sea	..	..	1	—
Holy Cross Priory, Ascot	..	..	—	1
Merlyn House, Southampton	..	..	1	—
W.R.V.S., Crabhill, Redhill	..	..	—	1
Seven Springs Cheshire Home	..	..	—	1
Bernard Baron Homes, Polegate	..	..	1	—
David Lewis Colony	..	..	1	—

THE FOLLOWING HAVE BEEN MAINTAINED AT COST OF OTHER AUTHORITIES

			<i>Men</i>	<i>Women</i>
Hampshire County Council	..	..	1	—
Norfolk County Council	..	..	—	1
Kent County Council	..	..	—	2
East Sussex County Council	..	..	—	2
London Borough of Westminster	..	..	—	1
Surrey County Council	..	..	—	3
London Borough of Tower Hamlets	..	..	—	1

Accommodation for the Temporarily Homeless
Section 21 (i) (b)

The Knowle, Oak Tree Lane, continued in the care of the Children's Department with one room officially reserved for cases of legal responsibility under section.

Handicapped Persons—Section 29

(a) BLIND PERSONS

(i) *Incidence of Blindness*—During the year 72 B.D.8 forms for new cases were received; of these, 52 were registered as blind within the meaning of the Act, and 20 as partially sighted.

The recommendations for treatment were mainly medical and hospital supervision.

(ii) *Registration*—

Total at 31st December, 1967	..	..	235
Registered during year	..	..	52
Died during year	..	..	29
Transfers from other areas	..	..	5
Transferred to other areas	..	..	5
			—
Total at 31st December, 1968	..	..	258
			—

		<i>Males</i>	<i>Females</i>	<i>Total</i>
Under 5 years	..	1	—	1
Between 5 and 15 years	..	1	2	3
Between 15 and 30 years	..	1	—	1
Between 30 and 50 years	..	11	6	17
Between 50 and 70 years	..	22	27	49
70 years and over	..	60	128	188
			—	—
			93	142
			—	—

(iii) *Home Workers*—Two blind men were included in the Home Workers' Scheme of the National Institute for the Blind, one as a basket-maker and one elocution and speech therapist.

Handicrafts. A weekly class with an average of 18 was held in the Social Centre for the Blind.

Braille and Moon lessons by domiciliary visits were given as required.

(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 86 partially sighted persons on the Register—20 males and 66 females.

(c) DEAF AND DUMB

The Chichester Diocesan Association for the Deaf and Dumb remain as the Council's Agents. The Assistant Missioner resident at Hastings continues to supervise Eastbourne cases, also acting as interpreter with sign language where required. It is regretted that no local club is available though facilities exist for local registered deaf to visit the club at Hastings. The total on the register at the end of the year was 21 (10 males, 11 females).

(d) HARD OF HEARING

With 51 persons on the Local Authority Register, the Eastbourne and District Hard of Hearing Association continues to provide an excellent service for a much larger number of persons with impaired hearing. Tribute must be paid to the work of the Association and in

particular to its hard working Honorary Secretary who reports as follows:

“Visitors to the homebound have been useful in checking hearing aids and taking action where necessary. This service could be greatly extended but finding suitable people to become Voluntary Visitors is not easy. During the year a small team of ten visitors made 336 visits.

Transport of infirm people to meetings of the Social Club has been very helpful and two Mini-buses are now used regularly.

Project ‘Vision Unlimited’ was started. This is a scheme to give a subscription to a newspaper or magazine to anyone local who has become deaf with speech after school-leaving age. This helps to give mental stimulus to a group of people who are restricted (not hearing the human voice) from general conversation, radio, sound of television, etc.

We are grateful to the group of young people who have taken a special interest in the Association during the year. One House of the Girls’ High School has made this their special project and they have helped in many ways, including visits to a long-stay hospital on our behalf and the decoration of the Church Hall for the Special Carol Service, held at St. Richard’s Church, Langney. This was very well attended in spite of bad weather.

The R.N.I.D. have given assistance to several people from their Television for the Deaf Fund. Advice has been given on ancillary equipment and financial help in several cases.

At the Association’s suggestion two ‘Communicators’ are now available to the Eastbourne Hospitals for patients with partial hearing. One of these is for use in the Out-patients’ Department at the Princess Alice Memorial Hospital.

At least once a year a meeting is arranged for one special group of the public. This year the Executive and Club Committees welcomed a large number of hospital staff, nurses, doctors, auxiliary staff and students and staff from Hellingly Hospital to Downside Hospital. Two films were shown, one entitled *Silent World—Muffled World*, borrowed from Glasgow. The interesting afternoon helped to focus attention on overcoming hearing impairment and we are grateful to Miss Rudd, Matron, for providing accommodation and refreshments.

The Social Club has continued to be popular and has done much to help create friendships which can defeat the isolation of deafness.”

(e) PHYSICALLY HANDICAPPED

So far as the Local Authority is concerned the number of cases, excluding those under 16, on the register at the end of the year was 182, Disability Groups being as follows:

Amputations	6
Arthritis and rheumatism	60
Congenital malformation	6
Diseases of the digestive and genito-urinary systems: of the heart or circulatory system: of the respiratory system (other than tuberculosis): and of the skin	22
Injuries of head, face, neck, trunk, injuries or diseases (other than tuberculosis) of the upper and lower limbs and of the spine	18
Organic nervous diseases	51
Tuberculosis (respiratory)	Nil
Tuberculosis (non-respiratory)	3
Other diseases and injuries	16
	182
	—

The Association Secretary reports as follows:

The Eastbourne Association for the Disabled had 193 disabled people on its register at the end of 1968.

During the year a total of 1,240 visits were made to members by the Association's 37 voluntary visitors, the Case Secretary and the Handicraft Teacher. These visits, invariably supplementing those made by the staff of the Health Department are valuable, particularly in so far as they help to maintain a link between the often housebound disabled person and the outside world. There is also sometimes an advantage in visiting on a non-official basis from voluntary choice.

The Handicraft Class, held on Tuesday mornings, continued with a maximum membership of 22. The Craft Teacher was employed by the Association for an additional day per month, to cope with the increasing need for tuition to housebound disabled. All the work is made for sale through the Craft Shop in Lewes and this adds impetus and purpose to the work done, in addition to its value as therapy and the opportunity of getting out of the house for one morning each week.

During the year the grant made to the Association by the Local Authority was increased. This grant was supplemented by the Executive Committee's various fund-raising efforts, which resulted in a total of £284 over the year. As in previous years, extra fuel was provided for some members during the winter, help was given towards the installation of a telephone for a severely handicapped member, television licences were supplied and grants were made towards holidays, transport often being provided as well. Free loans were made to members of wheelchairs, "helping hand" gadgets, heaters, radio sets, etc.

In 1968 the Association began reserving a room for the whole of June at a private house in Worthing, owned by a trained nurse. Four members were sent for a week and this proved to be a great success, providing a much-needed change both for the disabled and their families. It is hoped to continue this arrangement each year.

During the year two outings were organised to the Congress Theatre and a Summer outing to Glynde Place was held in September.

Local Authority Assistance with Alterations—This service continued to be of paramount importance to enable handicapped persons to lead an independent existence. During the year 21 individuals were assisted at a total cost to this Authority of £630.

(f) EPILEPTICS

Once again it must be admitted that the Department does not know the real need as it is undisclosed. In regard to individual cases, close liaison is maintained with the Department of Employment and Productivity and the Probation Service, also the Youth Employment Officer. One residential case continued to be provided for in Chalfont Colony.

Old People's Organisations

MEALS ON WHEELS

It is interesting to note that though difficulty was experienced during the Winter with the waiting list, and at the time of writing this report due to the preparation of meals at Staveley Court distributed by the Home Help Service, the waiting list has been reduced to an insignificant number. Thanks must once again be expressed to the W.R.V.S. for running this admirable service. During the year 25,303 meals were supplied—an average of 98 per day—at a cost to this Authority of £366 13s. 4d.

Note: This is a subsidy of 3d. for each meal, plus such additional sum as an individual case may be required.

In addition 1,134 meals were supplied from a residential Home and delivered to an adjoining group of flatlets for old persons by the Home Help Service.

EASTBOURNE OLD PEOPLE'S WELFARE COUNCIL

Whilst once again paying tribute to the work of many of the representative bodies, it is regretted that it cannot be reasonably said that this body provides the focus of local work for the elderly so far as voluntary bodies are concerned.

Registration of Homes—Section 37

During the year there were 5 registrations and 4 cancellations and at the end of the year 26 Homes were providing 294 beds. It is regrettably true that the regulations under the Building Byelaws tend to dissuade possible applicants from registration on cost grounds.

Care of Property—Section 48

The work under this section continues to use a considerable amount of staff time. At the end of the year the property of 36 persons was in care.

Burials

During the year 3 cremations and 9 burials were arranged at a total cost of £377 1s., of which £318 14s. was recovered.

Occupational Therapy

The number of new patients referred for occupational therapy has increased this year, also there is an increase in the total number of visits made.

Equipment for use by the disabled has been in greater demand than ever, and the majority of visits to homebound patients has been to ascertain specific aids and adaptations necessary.

It is felt that more residents in the Part III Homes should participate in the handicraft and/or social sessions provided, but there remain some not willing to do so. There were, however, excellent results from those who entered the East Sussex Handicraft Exhibition, many awards being gained by those in the "over 85 years old" class.

The work of the Occupational Therapist and her Assistants is summarised below:

Visits to Part III Homes:

Trevin Towers	..	..	..	..	47
Willoughby Court	..	..	..	..	50
Staveley Court	..	..	..	..	50
Parker House	..	..	..	..	75
New patients for domiciliary work	..	..	..	..	40
Total number of visits to domiciliary patients	..	..	..	..	275

SECTION D

PREVALENCE OF, AND CONTROL OVER, INFECTIOUS AND OTHER DISEASES

Notifications

The pattern of the reported incidence of notifiable infectious diseases remains remarkably and consistently low from year to year, the main variant being a higher incidence of measles in alternate years, 1968 being a "low" year.

Isolated single cases of dysentery and acute poliomyelitis occurred but there were no reported cases of food poisoning.

Notifications of Infectious Diseases (Corrected)

<i>Notifiable Disease</i>	<i>All ages</i>	<i>0-5</i>	<i>5-15</i>	<i>15-45</i>	<i>45-65</i>	<i>65 and over</i>	<i>Unknown</i>
Scarlet Fever	15	5	6	4	-	-	-
Whooping Cough	3	2	1	-	-	-	-
Measles	185	116	65	3	1	-	-
Tuberculosis (Respiratory)	4	-	-	3	-	1	-
Tuberculosis (Other)	1	-	-	1	-	-	-
Acute Poliomyelitis	1	-	-	-	1	-	-
Dysentery	1	-	-	1	-	-	-
Totals	210	123	72	12	2	1	-

Medical Arrangements for Long-Stay Immigrants

In accordance with the Ministry of Health Circular 3/65 dated 4th January, 1965, notification of entry into this country is received from the port of entry Authority of long-stay immigrants who intend to reside in Eastbourne.

Details are given below of the notifications received and the number of successful contacts in 1968. It should be noted that the Eastbourne Hospitals Group, in co-operation with this department, made their own contacts with immigrants employed by them.

LONG STAY IMMIGRANTS

Notification of arrival	70
---------------------------------	----

COUNTRY OF ORIGIN

Commonwealth Countries:

Pakistan	1
Other Asian	3
African	1
Other	2

Non-Commonwealth Countries:

European	43
Other	20

—
70

Successful contacts made by:

Public Health Inspectors	24
Health Visitors	15
Eastbourne College	6
Eastbourne Hospitals	22

—
Total .. 67
—

Public Health Laboratory Service

Pathology investigations were carried out on behalf of the department at Public Health Laboratory, Brighton, under the direction of Dr. J. E. Jameson, and by Dr. D. C. Taylor and Dr. J. Surtees, pathologists to the Eastbourne Hospital Management Committee, to whom acknowledgement 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 Hospital—Mondays for women and children, and Wednesdays for men.

New cases attending the centre from the Hospital Catchment Area are shown in the table below. The figures in brackets relate to 1967.

<i>Condition</i>	<i>Males</i>	<i>Females</i>	<i>Total</i>
Syphilis	2 (1)	1 (0)	3 (1)
Gonorrhoea	9 (10)	2 (0)	11 (10)
Other Conditions ..	43 (51)	21 (5)	64 (56)

SECTION E

SANITARY CIRCUMSTANCES OF THE AREA

Water Supply Sewerage and Sewage Disposal
Public Baths Report of the Chief Public Health Inspector

WATER SUPPLY

With reference to Circular 1/69, details of the supply are contained on pages 60 and 61 of my Report for 1967. The average content of fluoride in supply is of the order of 0.12 mg./l.

LEAD AND PLUMBOSOLVENCY

Notwithstanding that the Local Authority is not the undertaker of supply the following information is given. Upon receipt of the circular letter of the Chief Medical Officer of the Ministry of Health dated 17th November, 1967, a series of samples of drinking water taken from the distribution system were submitted for analysis. These samples had been in contact with lead pipes for varying periods.

The highest level of solvency found after overnight contact was 0.234 mg./l and no sample exceeded the World Health Organisation European Standard upper limit of 0.3 mg./l for such circumstances. Eastbourne water, whilst within safe limits for plumbosolvency, is more lead solvent than would be expected of a hard water with little organic impurity.

NITRATE CONTENT OF PUBLIC WATER SUPPLY

In the course of the year the Eastbourne Waterworks Company drew the Corporation's attention to seasonal rises in the nitrate levels in water from certain of the Company's wells and particularly the Cornish well where for a few weeks of the year levels of the order of 14 to 16 mg./l nitrate nitrogen were detected. These rises were attributed to the application of nitrate fertilisers upon farmland in the catchment area owned by the Corporation and leased to tenant farmers.

The only available W.H.O. standard is a world standard where the recommended upper limit is 11.2 p.p.m. nitrate nitrogen. Although there was no evidence of any untoward effect of the seasonal rise and no clinical evidence of the childhood condition of Methaemoglobinaemia

which can result from excessive nitrate intake, a decision was taken in respect of the season 1968/69 that the application of nitrate fertiliser should be restricted with a view to determining the effect of such action upon the nitrate level which it was anticipated would not exceed the W.H.O. World Standard upper limit. If and when, in due course, a European Standard is published it may well be that the former figures would not exceed such standard. The significance of a European Standard as opposed to a World Standard derives from the fact of a significantly less average consumption of drinking water per head in temperate climates as opposed to tropical climates.

The following is a typical analytical report upon a sample from mains supply :

Date of Report—17.9.68

PHYSICAL

Taste	..	..	..	..	..	..	Nil
Odour	..	..	..	..	..	..	Nil
Colour (Hazen)	..	..	..	..	..	..	Nil
Turbidity (F.E.)	..	..	..	..	..	..	Nil
Conductivity	..	..	..	..	..	..	430
Total Solids (dried at 180° C.)	..	..	..	..	..	..	310.0
Suspended Solids	..	..	..	..	..	..	Nil
pH	..	..	..	..	..	..	7.2
Temperature °C.	..	..	..	..	..	..	—
pHs	..	..	..	..	..	..	—

CHEMICAL

Alkalinity (as CaCO ₃)	..	182.0 mg./l.	Fluoride	..	..	— mg./l.
Total Hardness (as CaCO ₃)	..	210.0 mg./l.	Chlorine (Free)	..	..	— mg./l.
N.C.H. (as CaCO ₃)	..	28.0 mg./l.	Chlorine (Total)	..	..	0.14 mg./l.
Free Carbon Dioxide	..	23.0 mg./l.	Copper	..	..	Nil mg./l.
Dissolved Oxygen	..	— mg./l.	Zinc	..	..	Nil mg./l.
Oxygen Absorbed			Lead	..	..	— mg./l.
(4 hrs. at 27° C.)	..	— mg./l.	Iron	..	..	— mg./l.
Ammonia (Free and Saline)	..	0.028 mg./l.	Manganese	..	..	Nil mg./l.
Ammonia (Albumonoid)	..	0.018 mg./l.	Aluminium	..	..	— mg./l.
Nitrate (as N)	..	6.7 mg./l.	Calcium	..	..	37.5 mg./l.
Nitrite (as N)	..	Nil mg./l.	Potassium	..	..	1.4 mg./l.
Chloride	..	42.4 mg./l.	Sodium	..	..	29.0 mg./l.
Sulphate	..	7.0 mg./l.	Silica	..	..	5.0 mg./l.
Phosphate	..	— mg./l.	Detergents	..	..	— mg./l.

REMARKS

The water is bright and clear in appearance, moderately hard in character and contains minimal organic and saline impurities.

Analysis indicates a water of good quality suitable for public supply.

SEWERAGE AND SEWAGE DISPOSAL

Work in connection with the new pumping station at Langney Point is nearer completion. When the tides are right it will be possible to tow out and place the 2,100 feet of new discharge pipe on the bed of the Channel. It is anticipated that work will be completed and all connections made by next Autumn.

PUBLIC BATHS

The Old Town Swimming Baths, which has a capacity of 45,000 gallons of fresh water derived directly from a borehole in the subsoil, is directly under the control of the Health Department. Breakpoint

chlorination conditions are maintained and once every four hours the whole of the water in the pool is circulated through two pressure filters.

Following adaptations to the changing accommodation, replacement of the chlorination and filtration plant and the old solid fuel boilers with an oil fired system and the installation of adequate central heating, it is now possible to keep the bath open all the year round.

The pool re-opened in July, 1968.

Twenty-two samples of water were taken for bacteriological examinations all of which were satisfactory.

The numbers using the bath during the year from 9th July, 1968, were:

Organised Parties—			
Local Authority Schools	..	..	14,773
Private Schools	..	..	Nil
Youth Organisations	..	..	429
Handicapped Persons	..	..	115
General Public	..	..	8,315
			<hr/>
			23,632
			<hr/>

The number of users in the previous five years were:

1963	..	..	..	..	20,959
1964	..	..	..	..	31,767
1965	..	..	..	..	30,780
1966	..	..	..	..	24,393
1967	..	..	..	..	37,991

Seaside Baths

Thirty individual baths are provided, 15 for males and 15 for females. The number of persons using these baths were:

Men	..	..	..	..	6,610
Women	..	..	..	..	1,839
Children	..	..	..	..	239
Retired persons (admitted at reduced prices)					3,357
					<hr/>
					12,045
					<hr/>

Devonshire Swimming Baths

The Devonshire Swimming Baths (under the control of the Entertainments Department) comprise two indoor sea-water baths of 70,000 and 13,000 gallons capacity respectively, the larger bath being in use during the summer months only. The baths are filled initially with filtered sea-water and wastage made good as required. The water is continuously recirculated and filtered through two rapid gravity filters, chlorinated, aerated and heated to a temperature of 72°–74° F. The circulation period is approximately 4½ hours, when both baths are in operation.

During the year, forty-eight samples of water were submitted for bacteriological examination, all of which showed that a high bacteriological standard is being maintained.

Other Swimming Baths

Five other swimming pools, two privately owned, and the other three at schools or colleges, are in use; 112 samples were taken from these pools and, generally, were of a satisfactory bacteriological standard.

REPORT OF THE CHIEF PUBLIC HEALTH INSPECTOR

EDWARD EDLINGTON, Cert. R.S.H.

In a holiday resort the emphasis of work is inevitably on achieving good standards of accommodation for visitors, good housing conditions for residents and ensuring that the many food premises and their staffs maintain a high hygienic standard.

This year has been no exception and figures reveal that in nearly all fields the amount of work continues to increase. Probably it is in dealing with houses in multi-occupation that we have encountered the most frustration during the year. Many problems have been ironed out which will enable a more progressive policy to be pursued.

A matter which causes some consternation to Inspectors when visiting houses in multi-occupation is the state of the electrical wiring. Inevitably it is the older-type houses which are let out into bed-sitting-rooms. Houses which, prior to the war, were occupied by a single family and wired accordingly, now often have the equivalent of eight to ten families, each having a cooker, water heater, fire, kettle and iron, all working off the original wiring circuits with the aid of multi-adaptors and, in some instances, it has been found that appliances, even cookers and fires, are not earthed. It should be borne in mind that the bulk of lettings in such houses are bed-sitting-rooms, and this brings another danger in so far as appliances are grouped together in a confined space, and often in close proximity to water pipes.

With the law as it stands at present, landlords are under no obligation to ensure that appliances are correctly wired and safe for tenants to use. This is a serious omission and one can only hope that changes in the law to safeguard tenants will be forthcoming.

A further problem constantly confronting Inspectors, and yet again one about which they can do nothing, is the number of bitter and very justified complaints made by tenants about the exorbitant charges made by landlords on the re-sale of electricity and gas from shilling in the slot meters placed in individual lettings.

It is commonplace for a tenant, often an old age pensioner, and often in indifferent health, to allege that to stay in their room for a day costs as much as ten shillings for heating alone. It is not surprising, therefore, that many retired people living alone in bed-sitting-rooms find it cheaper and more comfortable to visit a cinema a couple of afternoons a week, or sit in the Municipal Sun Lounge. The amount paid out in heating, cooking and lighting frequently doubles the amount of rent paid.

While such conditions prevail it is no wonder that many tenants in multi-occupied houses resort to the use of paraffin and become a potential danger to themselves and every other person living in the house.

I would express my appreciation to all members of the staff for their loyalty and enthusiasm. It is necessary from time to time to re-allocate duties in order to spread the work load, and I am most grateful to staff for their co-operation. I express the wishes of the staff as well as my own when I say "Thank you" to Miss G. Woods for her cheerful and efficient handling of the increased load of paperwork.

General Summary

Visits and inspections made by the Public Health Inspectors in 1968:

For general public health purposes ..	2,366
Inspections under the Housing Acts, etc.	1,545
In connection with food and to food premises	3,332
Infectious disease control visits and investigations	75
Prevention of Damage by Pests Act, 1949..	285
SO ₂ and Smoke Recordings	662
Offices, Shops and Railway Premises Act, 1963	793
Visits for miscellaneous purposes ..	1,098
	10,156

Food animals inspected at slaughterhouse 11,081

FOOD HYGIENE REGULATIONS

The following table gives details of food premises subject to the Food Hygiene (General) Regulations, 1960:

	No.	<i>No. fitted to comply with Regulation 16</i>	<i>No. to which Regulation 19 applies</i>	<i>No. fitted to comply with Regulation 19</i>
Bakers and Bakers' Shops ..	39	39	39	39
Butchers	38	37	38	38
Confectioners	62	62	33	33
Dairies	1	1	1	1
Fish and Fried Fish ..	28	27	28	28
Fruiterers and Greengrocers ..	58	56	47	47
Grocers, Provision and General Stores	108	108	108	108
Hotels and Guest Houses, etc.	410	386	410	410
Meat Depots	2	2	2	2
Ice Cream Manufacturers ..	9	9	9	9
Ice Cream Stores	3	3	3	3
Public Houses and Hotels with Open Bars	62	60	62	61
Restaurants, Cafes and Snack Bars	131	131	131	131
Residential Homes, etc. ..	39	39	39	39
Schools	41	41	41	41
Slaughterhouse	1	1	1	1
Wholesale Manufacturers ..	3	3	3	3

The Inspectors responsible for the enforcement of the current Food Hygiene Regulations are fully conscious of their duties and their responsibility to the residents and visitors of Eastbourne in endeavouring to see that all food is prepared, stored and sold under hygienic conditions, and it is considered a fair comment to state again that in the very great majority of cases the proprietors of food businesses of whatever kind, large or small, are anxious not only to comply with legal requirements, but have a genuine desire to ensure that the food supply is clean and safe. This is not to say that conditions are always as high as one would wish and, indeed, in a number of instances pressure has had to be brought to bear to secure improvements and this in some rather unexpected places.

Whilst being mindful of our prime duty of enforcement, we are convinced that our efforts generally to secure improvements where necessary are far better achieved by securing willing co-operation of the proprietors of the businesses concerned than following strict legal procedure and whilst we would not suggest the improvements over the year have been outstandingly spectacular, we consider that our achievement has been one of steady progress throughout.

Those of us engaged in this work who have had experience of this nature in other towns are firmly of the opinion that speaking generally the standard of hygiene in food premises in our town will bear comparison with any in the country.

During the year a concentrated effort was made to see that all food vehicles operating from and in the Borough complied with the Food Hygiene (Markets, Stalls and Delivery Vehicles) Regulations, 1966, and with the exception of one or two the requirements generally were fully met. In the odd exception action was deferred due to the pending change of the vehicles—the deficiency in these cases being that of adequate hand-washing facilities.

Food Inspection

The number of visits to inspect premises in connection with the safety of food was well maintained. A total of 3,193 routine and 139 special inspections showed an increase over last year of 103 visits. Food premises are inclined to be improving—management striving to get more up to date and easier cleaned equipment. Greater care is needed by some members of the staff in such premises and Inspectors have co-operated with management in endeavouring to put across to staff the necessity for greater care and a higher standard of personal approach to food problems.

As during the last twenty-five years a 100 per cent inspection was maintained of freshly slaughtered carcasses, a total of 613 visits being made to the slaughterhouse to inspect 11,081 animals. The high cost of meat has made buyers shop more widely, with animals arriving at the slaughterhouse more frequently, but in smaller numbers. As a result of this, despite a fall in kill figures of 1,341 animals, compared with last year, 60 more inspections were necessary.

Inspection of frozen meat was carried out at wholesalers' cold stores.

Fish inspection has been regularly carried out at the fish market to ensure satisfactory supplies, and the standard of hygiene at the market has been maintained.

There is little slaughter of live poultry within the Borough, but inspection has been regularly carried out at wholesale stores and retail shops.

Carcases and Offal Inspected and Condemned in Whole or in Part

	<i>Cattle excluding Cows</i>	<i>Cows</i>	<i>Calves</i>	<i>Sheep and Lambs</i>	<i>Pigs</i>
Number killed	1,357	72	385	4,790	4,477
Number inspected	1,357	72	385	4,790	4,477
<i>All diseases except Tuberculosis:</i>					
Whole carcases condemned	—	5	7	7	13
Carcases of which some part or organ was condemned	727	52	6	509	880
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci	53·6	79·2	3·4	10·8	19·9
<i>Tuberculosis only:</i>					
Whole carcases condemned	—	—	—	—	—
Carcases of which some part or organ was condemned	1	—	—	—	24
Percentage of the number inspected affected with tuberculosis	·07	—	—	—	·5
<i>Cysticercosis:</i>					
Carcases of which some part or organ was condemned	4	—	—	—	—
Carcases submitted to treatment by refrigeration	4	—	—	—	—
Generalised and totally condemned	Nil	—	—	—	—

Slaughtering and Inspection of Food Animals

PREMISES

Overall a reasonable standard was maintained in connection with hygiene standards, Inspectors and management co-operating to keep slaughterhouse staff on their toes. The "kill" figure continues to fall, and the "waiting" periods between slaughter are not always used to full advantage.

INSPECTION

Once again very little inspection has been necessary outside normal slaughtering hours and a 100 per cent inspection has been maintained.

Diseases of Animals Act, 1958

The police have relinquished some of their duties under this Act, and a number of Public Health Inspectors have been appointed as authorised officers. A system has been established to ensure smooth and co-operative working between Ministry Veterinary Officers, Public Health Inspectors and Police in the event of any emergency.

Food Premises

Visits and inspections made to food premises were as follows:

Dairies and Milk Distributors	..	246
Ice Cream Manufacturers	.. ..	106
Ice Cream Retailers	.. ..	198
Bakehouses	.. ..	101
Butchers' Shops and Wholesale Depots		206
Meat Products Preparation Premises	..	61
Fish Shops	.. ..	95
Fried Fish Shops	.. ..	47
Other Food Shops and Stores	..	576
Hotel and Restaurant Kitchens	..	836
Slaughterhouse	.. ..	613
Food Samples taken	.. ..	575
In connection with unsound food	..	139
Merchandise Marks Act, 1926	.. ..	23

The following premises were 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:

Butchers' Shops	.. ..	27
Grocers' and Provision Stores	..	14
Fried Fish Shops	.. ..	9

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 95 per cent of the milk sold is pasteurised, the balance being made up of untreated milk, and a small sale of sterilised and ultra-heat treated milk.

There is 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)	.. ..	2
Distributors (persons)	.. ..	99

Of these, four distributors sell cream only.

(ii) *Licences granted to use the special designations indicated:*

To Pasteurise Milk	1
Dealers' Licences to use the designation "Pasteurised"	95
Dealers' Licences to use the designation "Sterilised"	23
Dealers' Licences to use the designation "Untreated"	5
Dealers' Licences to use the designation "Ultra Heat Treated"	3

(b) SAMPLING OF MILK

Milk is sampled and examined broadly for four 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, and a certain number of samples are subjected to the Penicillin Test.

Samples taken, with the results of analysis or examination, were as follows:

(i) *Chemical Analysis*

Seven samples were submitted for analysis. The results indicated that the local milk supply was of a good quality. The average fat and non-fat solids was 3.6 per cent and 8.65 per cent compared with the prescribed standard of 3.0 and 8.5 per cent.

(ii) *Bacteriological Examination:*

Class of Milk	No. of Samples Tested	Appropriate Tests	Number of Samples		
			Passed	Failed	Void
Pasteurised and Tuberculin Tested (Pasteurised)	82	Phosphatase ..	82	-	-
		Methylene Blue	81	1	-
Untreated	18	Methylene Blue	12	5	1
Sterilised	19	Turbidity Test	19	-	-
Cream	1	Methylene Blue	1	-	-

The samples which failed the Methylene Blue Test were referred to the Divisional Milk Officer and to the dairy concerned.

(iii) *Examination 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 farm-bottled milk were again taken on a rota system. Twenty-two samples were taken during the year and were tested also for *Brucella abortus*. M. tuberculosis was not found in any of the guinea pigs inoculated with the milk.

(iv) *Penicillin Test.*

Forty-two samples were subjected to the Penicillin Test, all of which were found to be satisfactory.

Manufacture and Sale of Ice Cream

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

(a) Wholesale Manufacturer	1
(b) Manufacture and retail sale	10
(c) For the sale of ice cream	170
(d) For the storage of ice cream for the purpose of sale	2

Of the 304 visits and inspections made to these premises, 106 were to manufacturers' premises and 198 to retailers.

Two hundred and eighty-nine samples were taken for bacteriological examination, and the following indicates the results:

<i>Grade</i>	<i>Number</i>
1	84
2	103
3	54
4	48

} 187
} 102

Fifty-nine of the samples were of soft ice-cream; 30 being in Grades 1 and 2.

As outlined in last year's report ice cream was primarily sampled to ascertain the hygienic standard under which it had been manufactured, stored or handled and subsequent to the results of the test applied—a bacteriological one—were placed in one of four grades, grades 1 and 2 being considered as satisfactory and grades 3 and 4 as unsatisfactory.

Considering the comment made in last year's annual report that "experience has shown that the products of nationally operated ice cream companies rarely give cause for concern" it is perhaps ironical that in the period under review, in the case of one of the nationally operated companies this turned out to be a false premise because as a result of some spot checks during the early part of the season it became quite evident that all might not be well in this connection and, indeed, the high percentage of Grades 3 and 4 in the figures shown for the pre-packed variety of ice cream is very largely due to much extended sampling in this particular field.

Through information obtained from the Public Health Laboratory it appeared that another authority in Sussex was obtaining a similarly unsatisfactory result and following consultations with the Public Health Inspectorate a concentrated effort was made to establish the extent and cause of the trouble. Other authorities in the area who, like ourselves because of previous experience, had not concentrated unduly on the pre-packed variety, were notified in order that they could follow up the matter in their respective areas. Of prime consideration, however, was the contact with the health authority of the area in which the ice cream was manufactured and with the chief bacteriologists of that company. The company was most concerned to learn of the results and took immediate steps in an endeavour to overcome the source of the trouble which, however, continued to elude them for some little time, but it is

pleasing to note that ultimately the problem was resolved and the product returned to its usual excellent standard.

We were particularly pleased to note that during the year the suggestion contained in last year's report advocating a more effective control of itinerant ice cream vending vans by licence or registration was taken up by the Association of Municipal Corporations and that body agreed to make appropriate representations to the Ministry on it.

Again we were disappointed to see at the commencement of the season particularly that the percentage of unsatisfactory results of the soft ice cream variety was below that which we expected, and it is quite clear that this state of affairs was again due to the time-consuming process of dismantling and cleaning of the soft ice cream machines. We again concentrated on this aspect and as the season wore on the results were again satisfactory.

Unfit Food

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

Adexoline (botts.)	3	Ice Cream (Packs)	64
Baby Food (pkts.)	17	Jam and Marmalade (lbs.) ..	632
Biscuits (lbs.)	17	Jelly (pkts)	249
Bitter Lemon (botts.)	2	Meat and Offal (lbs.)	1,079
Bovril (jars)	5	Meat (cans up to 4 lbs.)	379
Butter and Margarine (lbs.) ..	86	Meat (cans over 4 lbs.)	36
Cakes (lbs.)	20	Meringues (pkts.)	1
Cake Mixture (pkts.)	7	Milk (cans)	49
Cereals (pkts.)	3	Milk Puddings (cans)	40
Cheese (pkts.)	91	Nuts (pkts.)	2
Cheese (lbs.)	20	Ovaltine (cans)	1
Coffee (lbs.)	1	Paste, meat and fish (jars) ..	1
Coffee, Instant (cans and jars)	13	Peanut butter (lbs.)	5
Coconut (pkts.)	1	Pie (lbs.)	1 $\frac{1}{2}$
Cordials (botts.)	36	Poultry (lbs.)	473 $\frac{3}{4}$
Cream Sponges and Eclairs ..	16	Puddings (cans)	7
Cream (cans)	22	Ribena (botts.)	5
Custard Powder (cans)	2	Salt (lbs.)	10
Dough (cwt)	2	Sandwich Spread (jars)	1
Dry Ginger (ozs.)	5 $\frac{1}{2}$	Sauces (botts.)	12
Fish (cans)	278	Sausages (cans)	3
Fish (stone)	44	Sausages (lbs.)	1
Flour (pkts.)	32	Shandy (cans)	1
Frozen Foods (pkts.)	1,433	Soup (cans)	1
Fruit (cans)	2,555	Tea (pkts.)	1
Fruit (dried) (lbs.)	78	Vegetables (cans)	1,791
Ham (lbs.)	330 $\frac{1}{2}$	Vinegar (botts.)	5
Honey (lbs.)	3 $\frac{1}{2}$	Virol (jars)	4
Horlicks (jars)	1	Vitovel Syrup (jars)	4

In this connection 139 inspections were made.

Most 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.

Food Complaints

The year again produced its miscellany of complaints of alleged unsatisfactory food purchased by members of the public and these were classified as follows:

Food containing foreign matter	29
Food affected with mould	13
Food in dirty containers	3
Other circumstances	19

and related to the following categories: ..

Meat pies, etc.	4
Sausages and sausage rolls	3
Bread and flour confectionery	17
Meat and meat products	14
Baby Food	1
Jam	1
Fish and fish products	3
Milk	6
Miscellaneous	15

The number of complaints shows a slight increase on the previous year (56) and reflects the general national trend for there to be an increase in the number of complaints received from members of the public concerning such matters. Nevertheless, it is surprising that only such a small percentage of complaints is actually made to the Health Department. It is well known that the majority of people either choose to ignore any unsatisfactory product which they may have purchased or more probably complain directly to the retailer concerned, and it has been our experience over the past few years when dealing with food complaints to find that the individuals who do bring the matter to our attention either have had reason to be dissatisfied with food purchased previously from a particular premises and have not done anything about it, or have taken it back to the retailer and possibly have not received the courtesy or consideration expected, and have had no ultimate knowledge that the matter has been looked into by the manufacturers, etc.

All the complaints continued to be investigated in detail as in previous years and departmental warnings and/or advice given as appropriate.

It was considered necessary, however, to refer for the consideration of the Public Health Committee two instances and in one case a formal warning was given and in the other legal proceedings were authorised and the manufacturer fined £25.

Sampling of Food and Drugs

We are again grateful for the co-operation of Mr. T. Rymer, the Public Analyst.

Eleven formal and 166 informal samples were submitted to the Public Analyst, of which 13 informal and 1 formal sample were found to be unsatisfactory. Forty of the samples were drugs, and one sample

of tripe was submitted for examination for the presence of pesticide residues.

The following gives particulars of samples which the Public Analyst reported as being unsatisfactory. In each case the matter was taken up with the manufacturer or retailer and necessary action taken.

Foods

BUTTER FUDGE—Contained other fat in addition to butterfat.

CREAM DOUGHNUTS (4)—The samples contained a substance which resembled cream in appearance but which actually consisted of imitation cream.

FLOUR—Contained 11 per cent excess of chalk.

INSTANT COFFEE—The label did not comply with the requirements of the Labelling of Food Order, 1953. It was found that a batch of labels had missed the third colour in printing, and essential wording was missing.

RUM FUDGE—Apart from an odour and flavour of rum, no rum at all could be detected in the sample.

SAUSAGES—Consisted of preserved pork sausages.

STEWED STEAK—Consisted of stewed steak in gravy containing 76 per cent of meat. The meat content included a large piece of tough gristle and piping which was inedible. The label did not comply with the requirements of the Labelling of Food Order, 1953.

TOMATO PUREE—DOUBLE CONCENTRATED—Consisted of tomato paste of normal quality as sold by retail in this country, and there was nothing double-concentrated about it.

YEAST FOOD AND YEAST NUTRIENT—In both cases the labels did not comply with the requirements of the Labelling of Food Order, 1953.

Drugs

OPTOVITE—50 per cent deficient in vitamin C as compared with the amount stated to be present on the label.

Bacteriological Sampling (other than Milk and Ice Cream)

Sixteen samples of cream and cream products and four sausage rolls from local factories were taken and returned as satisfactory.

Liquid Egg (Pasteurisation) Regulations, 1963

There are no pasteurisation plants in the area and no samples have been taken.

Merchandise Marks Act, 1926, and Merchandise Marks (Imported Goods) Orders

The provisions of this Act are administered by Inspectors in the course of their other duties in food premises and 23 special inspections were made.

HOUSING

That Mr. T. Matthews, the District Inspector responsible for dealing with housing, has lost none of his zeal and enthusiasm is evidenced by the figures shown in the tables below.

Of fifty houses brought up to a good standard, sixteen were houses on which Closing Orders were determined as a result of owners submitting and carrying out works of recovery.

Sixteen houses and ten "parts of buildings" have been closed during the year and again in most of these cases the local authority undertaking responsibility for rehousing the occupiers will enable the owners to see recovery of the property as an economic proposition. The owners may have to spend considerable sums of money to do so but will be able to charge an economic rent.

Despite the fact that many owners and owner/occupiers are still awaiting the implementation of the "White Paper" before applying for improvement grants, there was an increase over the previous year in applications.

During the year 2,573 land charge enquiries were made and the Inspectors answered questions concerning the expectancy of life and outstanding repair notices in the case of about 2,000 properties. Special visits and inspections in this connection resulted in 96 cases.

Inspections made by the Public Health Inspectors for housing purposes were:

Dwelling Houses (Housing Act)	918
Dwelling Houses (Public Health Act)	250
Improvement Grants	242
Revisits	135

Housing Report

The following is the total of the quarterly reports submitted to the Ministry of Housing and Local Government as to action taken in 1968:

A. HOUSES DEMOLISHED DURING THE YEAR	
In or adjoining Clearance Areas declared under Section 42 of the Housing Act, 1957	16
Not in or adjoining Clearance Areas (as a result of action under Section 16 or 17 (1) Housing Act, 1957)	2
B. UNFIT HOUSES CLOSED DURING THE YEAR IN PURSUANCE OF CLOSING ORDERS OR UNDERTAKINGS	
Under Sections 16 (4), 17 (1) and 35 (1) Housing Act, 1957, and Section 26, Housing Act, 1961	21
Number of separate dwellings contained therein	21
Under Sections 17 (3) and 26, Housing Act, 1957	Nil
Parts of Buildings closed under Section 18, Housing Act, 1957	10
Number of houses made the subject of Demolition Orders	8

C.	NUMBER OF PERSONS DISPLACED DURING THE YEAR	
	From houses to be demolished in or adjoining clearance areas	20
	From houses to be demolished not in or adjoining clearance areas	38
	From houses to be closed	64
	From parts of buildings to be closed	5
D.	NUMBER OF FAMILIES DISPLACED DURING THE YEAR	
	From houses to be demolished in or adjoining clearance areas	9
	From houses to be demolished not in or adjoining clearance areas	15
	From houses to be closed	23
	From parts of buildings to be closed	2
E.	UNFIT HOUSES MADE FIT	
	After informal action by local authority by owner	21
	After formal notice under Sections 9 and 16, Housing Act, 1957: by owner	Nil
	by local authority	Nil
	After formal notice under Public Health Acts	13
	After modification or revocation of a clearance order under Section 21, Housing Act, 1961	Nil
	After determination of a demolition order under Section 24, Housing Act, 1957	Nil
	After determination of a Closing Order under Section 27, Housing Act, 1957	16
F.	HOUSES IN WHICH DEFECTS WERE REMEDIED (other than unfit houses made fit) after formal notice under Public Health Acts	1
G.	UNFIT HOUSES IN TEMPORARY USE (Housing Act, 1957)	
	Retained for temporary accommodation under Section 48:	
	Number of houses	1
	Number of separate dwellings contained therein	1
H.	PURCHASE OF HOUSES BY AGREEMENT	
	Houses in clearance areas other than those included in confirmed or compulsory purchase orders	Nil

Improvement Grants

For the first three months of the year this work was undertaken as formerly by my ever cheerful predecessor, Mr. Arthur Lindfield, who has now "given it best". We have always been grateful for his kind help and guidance and we wish him well.

Mr. T. Matthews added this aspect of housing to his other commitments and it is pleasing to note an increase in the number of new applications.

Standard grant applications totalled 80, of which 53 were from owner/occupiers, and during the year 69 properties were improved with the aid of standard grants. Three applications were rejected as the properties concerned were not considered to have a life of fifteen years.

Twelve applications for discretionary grants were approved in respect of alterations and additions to house the standard grant facilities where this could not be done within the maximum sum for these grants.

As in previous years there are still some owners who prefer not to take advantage of the grants and, in all, 104 plans for provisions of bathrooms and hot water were approved during the year under the Building Regulations.

Rent Act, 1957, Certificates of Disrepair

No applications for certificates of disrepair, or for cancellation of certificates, were received during the year.

Houses in Multiple-Occupation

Financial stringency which, as reported last year, slowed down the proposed programme for dealing with this class of property, continued during 1968. There was a shortage of staff in several departments with the result that only seven notices were served under Section 15 of the Housing Act, 1961. More could have been served except for staff shortages in the Fire Service with the resultant inability to co-ordinate the service of notices under Sections 15 and 16.

It has, however, become increasingly apparent that this is a growing problem and every effort must be made to bring as many properties as possible up to a reasonable minimum standard, without any further delay.

GENERAL INSPECTIONS FOR PUBLIC HEALTH PURPOSES

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

Complaints investigated	.. ..	583
Schools	.. ..	22
Camping Sites and Moveable Dwellings	..	113
Swimming Baths	.. ..	288
Drainage and Plumbing Works	.. ..	144
Land Charges Enquiries	.. ..	96
Stables and Piggeries	.. ..	75
Smoke Observations and SO ₂ recordings	..	189
Factories	.. ..	160
Workplaces	.. ..	19
Outworkers' Premises	.. ..	29
Offices, Shops and Railway Premises Act	..	793
Departmental Properties	.. ..	118
Revisits	.. ..	645
Infectious Disease Investigations	.. ..	75
Miscellaneous visits	.. ..	1,098

Statutory Notices under the Public Health Act, 1936

Most owners of property comply with the requirements of informal notices, but it was necessary during the year to serve the following formal notices:

Section 39—To carry out works of drainage	1
Section 93—To abate nuisances	27

Caravan Sites and Control of Development Act, 1960

One site was licensed during the year, the total in the Borough at the end of the year being 296 vans on five sites. Of these, 264 were used as holiday caravans only. All sites comply with the requirements of the Act.

Rag Flock and Other Filling Materials Act, 1951

Six premises were registered by the local authority under the provisions of this Act, and frequent inspections are made to ensure that the requirements as to cleanliness of materials and bedding are complied with.

Pet Animals Act, 1951

Five applications for licences to keep pet shops were received, all of which were granted.

Animal Boarding Establishments Act, 1963

One application for a licence to keep an animal boarding establishment was received during the year, and a licence granted.

Riding Establishments Act, 1964

One application was received for a licence to keep a riding establishment, and a licence granted.

Fertilisers and Feeding Stuffs Act

Two samples of feeding stoffs were taken during the year, both of which were satisfactory.

Clean Air Act, 1956

There have been few complaints this year from members of the public apart from complaints of the occasional garden bonfire. There would appear to have been rather more garden fires than usual, not altogether unassociated with the transition period of the pulling down of one destructor works and the building of a modern one.

Under Section 10 of the Act, plans were received and approval given for the erection of five chimneys at five new premises. The trend is still towards the use of low viscosity oil.

National Survey of Air Pollution

The two members of staff who are Assistant Borough Meteorologists have again been responsible for the three stations where smoke and SO₂ recording instruments are installed. These three stations were taken out of commission at the end of May and one was resited at Avenue House to be maintained for local comparison.

We must express our gratitude again for the continued supply of comparative information from Warren Spring Laboratory.

Noise Abatement Act, 1960

It has been a very "quiet" year judging by the low number of complaints received. "Music while you work" on the night shift at a

local factory was remedied by a reduction of the volume control and by ensuring that windows and doors were kept closed.

The exuberance of youth and the ability to stay awake at weekend parties until the early hours is never easily explained to the more elderly of our population. A couple of such complaints were amicably resolved by a suitable amount of "oil on water". To be more accurate, in one instance the matter was resolved by the kindly offer, with an apology, of a "tot" of something from the party. The acceptance laid the foundations for a more peaceful life for the district inspector.

Repeated complaints alleging the continuous testing of motor car horns at a local garage were entirely unfounded. The excessive use of motor horns was due to impatience and a traffic problem which the action of traffic wardens has helped to resolve.

Scrap Metal Dealers

There were 16 Scrap Metal Dealers registered with the Police during the year, and visits were made to ensure freedom from nuisance.

Offices, Shops and Railway Premises Act, 1963

During the year 68 premises were registered and 76 deleted from the register because of changing circumstances. The total number of registered premises is now 1,005 of which most have received a general inspection. During the year 504 general inspections were made, the total number of visits made for all purposes being 793.

There has been an increase in the number of enquiries from employers and employees concerning the provisions of the Act and it is obvious that there is a greater willingness to make it work.

Inspectors have endeavoured to see as many different kinds of machines as possible and to learn about their working parts. A number of Inspectors have visited exhibitions and showrooms to study the many machines now found in offices and shops. It is, of course, the older type of machine, particularly the slicing and mincing machines found in retail shops which present most of the problems from the point of view of ensuring safety.

Inspectors have also tried to learn something of the working of the different kinds of passenger and goods lifts; also conveyor belts. This is a new subject for Public Health Inspectors and the knowledge acquired makes for intelligent discussion with employers seeking advice.

Close liaison has been maintained with the Chief Fire Officer and his staff, and with H.M. Factories Inspectorate and the Ministry of Labour.

The following is the return submitted to the Ministry of Labour under Section 60 of this Act in respect of the period 1st January, 1968, to 31st December, 1968.

TABLE A—REGISTRATIONS AND GENERAL INSPECTIONS

<i>Class of premises</i>	<i>Number of premises registered during the year</i>	<i>Total number of registered premises at end of year</i>	<i>Number of premises receiving a general inspection during the year</i>
Offices	27	272	183
Retail shops	30	571	292
Wholesale shops, warehouses ..	4	40	—
Catering establishments open to the public, canteens ..	6	119	28
Fuel store depots	1	3	1
TOTALS	68	1,005	504

TABLE B

Number of visits of all kinds by Inspectors to registered premises 793

TABLE C—ANALYSIS OF PERSONS EMPLOYED IN REGISTERED PREMISES BY WORKPLACE

<i>Class of workplace</i>	<i>Number of persons employed</i>
Offices	3,535
Retail shops	3,380
Wholesale departments, warehouses ..	615
Catering establishments, open to the public ..	1,420
Canteens	72
Fuel storage depots	5
TOTAL	9,027
Total Males	4,089
Total Females	4,938

TABLE D—EXEMPTIONS—Nil.

TABLE E—PROSECUTIONS—Number instituted and completed during the year—Nil.

TABLE F—INSPECTORS

Number of inspectors appointed under Section 52 (1) or (5) of the Act. . . . 7

Number of other staff employed for most of their time on work in connection with the Act Nil

ANALYSIS OF CONTRAVENTIONS FOUND

<i>Section</i>	<i>Number of Contraventions found</i>
5—Overcrowding	2
6—Provision of thermometer	20
8—Lighting	13
9—Sanitary conveniences	3
10—Washing facilities	23
12—Clothing accommodation	3
13—Sitting facilities	1
16—Floors, passage and stairs	8
17—Fencing exposed parts of machinery	1
24 { First Aid	57
{ Abstract of Act	68
{ Other matters	9
TOTAL	208

REPORTED ACCIDENTS

<i>Workplace</i>	<i>Number reported</i>		<i>Total number investigated</i>	<i>Action recommended</i>			<i>No action</i>
	<i>Fatal</i>	<i>Non-Fatal</i>		<i>Prose-cution</i>	<i>Formal warning</i>	<i>Informal advice</i>	
Offices	—	2	—	—	—	—	2
Retail shops	—	13	7	—	—	—	13
Wholesale shops, warehouses	—	3	1	—	—	—	3
Catering establishments open to public, canteens	—	1	1	—	—	—	1
Fuel storage depots	—	—	—	—	—	—	—
TOTALS	—	19	9	—	—	—	19

ANALYSIS OF REPORTED ACCIDENTS

	<i>Offices</i>	<i>Retail shops</i>	<i>Wholesale warehouses</i>	<i>Catering establishments open to public canteens</i>	<i>Fuel storage depots</i>
Machinery	-	-	-	-	-
Falls of persons	-	4	1	1	-
Stepping on or striking against object or person	-	2	-	-	-
Handling goods	2	4	1	-	-
Struck by falling object ..	-	1	1	-	-
Electrical	-	1	-	-	-
Not otherwise specified	-	1	-	-	-

FACTORIES ACT, 1961

1. Inspections for Purposes of Provisions as to Health

<i>Premises</i>	<i>Number on Register</i>	<i>Number of</i>		
		<i>Inspections</i>	<i>Written Notices</i>	<i>Occupiers Prosecuted</i>
(i) Factories in which Sections 1, 2, 3, 4 and 6 are enforced by the Local Authority	43	16	-	-
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority	248	66	-	-
(iii) Other Premises in which Section 7 is enforced by the Local Authority (excluding outworkers' premises)	51	78	4	-
TOTAL	342	160	4	-

2. Cases in which Defects were Found

<i>Particulars</i>	<i>Number of cases in which defects were found</i>				<i>Number of cases in which prosecutions were instituted</i>
	<i>Found</i>	<i>Remedied</i>	<i>Referred</i>		
			<i>To H.M. Inspector</i>	<i>By H.M. Inspector</i>	
Want of cleanliness (S.1) ..	5	5	-	-	-
Overcrowding (S.2) ..	-	-	-	-	-
Unreasonable temperature (S.3)	-	-	-	-	-
Inadequate ventilation (S.4)	-	-	-	-	-
Ineffective drainage of floors (S.6) ..	-	-	-	-	-
Sanitary Conveniences (S.7)					
(a) Insufficient ..	5	5	-	1	-
(b) Unsuitable or defective ..	4	4	1	2	-
(c) Not separate for sexes	-	-	-	-	-
Other offences against the offences relating to outwork)	1	1	-	-	-
TOTAL ..	15	15	1	3	-

Part VIII of the Act—Outwork

SECTIONS 133 AND 134

Class of work	Section 133		
	No. of Outworkers in August list required by Section 133	No. of cases of default in sending list to the Council	No. of prosecutions for failure to supply lists
Wearing apparel	25	—	—
Curtains and furniture hangings	6	—	—
Scooter and moped accessories	5	—	—
Rosettes	1	—	—
TOTAL	37	—	—

SECTION 134

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

Construction (Health and Welfare) Regulations, 1966

Redevelopment and building necessitated about 70 visits being made to building sites to enforce the provisions of these regulations brought in under Sections 7 and 127 of the Factories Act. In 4 cases it was necessary to serve informal notices regarding provision of sanitary accommodation.

RODENT CONTROL

(a) Surface Control

There were 289 complaints concerning rats and 96 concerning mice, these numbers being fairly consistent with previous years.

The few agricultural areas within the Borough were visited but they are mostly under private contract and there were again no official complaints.

Baiting of the authority refuse tips showed little rodent activity.

(b) Sewer Baiting

Systematic sewer control was maintained, ten per cent of the sewer manholes being lifted in Spring and Autumn to allow baiting of sewers with oatmeal and Warfarin. There was a slight decrease in the number of takes.

Wasps' Nests

We had few complaints regarding wasps and advice was given on how to deal with them. A few nests were destroyed by our rodent operative in places that concerned children and elderly people.

	<i>Type of Property</i>				
	<i>Local Authority</i> (1)	<i>Dwelling Houses</i> (2)	<i>All other (including business premises)</i> (3)	<i>Total of Cols. (1) (2) and (3)</i> (4)	<i>Agricultural</i> (5)
1. Number of properties inspected as a result of complaint ..	5	315	54	374	—
Number of such properties found to be infested by:					
Rats (a) Minor ..	3	214	24	241	—
(b) Major ..	—	5	—	5	—
Mice (a) Minor ..	2	85	27	114	—
(b) Major ..	—	—	—	—	—
2. Number of properties inspected in the course of survey under the Act	—	600	—	600	—
Number of such properties found to be infested by:					
Rats (a) Minor ..	—	67	—	67	—
(b) Major ..	—	2	—	2	—
Mice (a) Minor ..	—	5	—	5	—
(b) Major ..	—	—	—	—	—
3. Treated by Operators	5	361	47	413	—
4. Visits for all purposes	19	2,715	365	3,099	—

Number of block control schemes carried out—41.

Verminous Premises

Inspectors again gave advice to a number of householders on how to get rid of cockroaches, ants, etc. and the “odd flea”. Several properties had to be treated after elderly people had been taken into care.

Pigeons

To keep down numbers “trapping” has been continued, but staffing difficulties have not allowed of any extra effort. A couple of complaints alleging “noise” and “dive-bombing” by seagulls were investigated. We are, however, a seaside Borough and in this age of change we must preserve some of our amenities as well as our sense of proportion.

Bacteriological Sampling, other than of Food

For bacteriological examination, a total of 186 samples of mains drinking water were taken. Of these, 180 samples were submitted to the

Eastbourne Water Company and six to the Public Health Laboratory. As a safeguard to our swimmers, 212 samples of water were taken from our swimming baths and paddling pools.

SECTION F MISCELLANEOUS

Nursing Homes
Nurses Agencies
Nurseries and Child Minders
Children Act, 1948
Midwives Act, 1951
Staff Medical Examinations
Cremation
Meteorology

NURSING HOMES ACT AND REGULATIONS

The relevant section of the Public Health Act with regard to registration and inspection of Nursing Homes continued to be administered by the Council and authorised officers of this Department.

The Nursing Homes Act, 1963, and the Conduct of Nursing Home Regulations provide, amongst other matters, for adequate and competent staffing, adequate space, furnishing and nursing equipment, together with sufficient sanitary and washing facilities, light, heating and ventilation.

The Council, as Registration Authority, has considerable powers of supervision to ensure that Nursing Homes meet and maintain the required standards.

There was no change in the number of registered establishments but one nursing home increased the number of beds so that at the end of the year there were 14 registered nursing homes providing 259 beds.

NURSES AGENCIES ACT, 1957

One licence in respect of an existing Agency was renewed. The records of the Agency were satisfactory on inspection by an authorised member of the Department.

NURSERIES AND CHILD MINDERS' REGULATION ACT, 1948

This enactment was amended by Section 60 of the Health Services and Public Health Act, 1968, which came into operation on the 1st November, 1968.

From that date the scope of the 1948 Act was extended to include premises (other than those wholly or mainly used as private dwellings) in which children are received for a total of two hours or more in the day and persons who in their own homes and for reward look after one or more children under the age of five, to whom they are not related, for similar periods.

The maximum penalty for failure to register was substantially increased and it was necessary to publicise the provisions of the Act as amended.

Local Health Authorities may, amongst other matters, make requirements concerning the number, qualification and experience of the persons who are to look after the children and may refuse to register premises and persons because of the condition of the premises, or equipment, etc.

It is expected that a considerable number of persons will register as child minders and that this will require the deployment of a senior health visitor as supervising officer for the purposes of the Act.

At the end of the year 15 premises were registered. Six of these provide child minding facilities for periods varying from a half-day to 2 days per week for up to 182 children whilst mothers are out shopping, etc.

The remainder include private nursery schools providing care and education on mornings only or for full days for up to 243 children.

Fifteen daily minders were registered in respect of a total of 75 children under 5 years at the end of the year.

CHILDREN ACT, 1948

The Medical staff of the Department were responsible for the statutory 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.

MIDWIVES ACT, 1951

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

During the year 31 midwives notified their intention to practise of whom 4 were in the Council's Domiciliary Midwifery Service and 27 employed in the Hospital Service.

STAFF MEDICAL EXAMINATIONS

New entrants to the Corporation service are required to complete a medical statement instead of submitting to a medical examination. Only in those cases in which the Medical Officer of Health is not satisfied with the answers is a physical examination carried out.

Number of Medical Examinations made:

Sick Pay	39
Superannuation	43
	—
	82
	—

Number of Medical Statements scrutinized .. 527

In addition to the above, forty-one examinations were carried out on candidates for admission to training colleges. There were also fourteen sessions at Chelsea Training College and six at Eastbourne College of Education for medical inspection.

THE EASTBOURNE CREMATORIUM DUTIES AS MEDICAL REFEREE

As Medical Referee to the Eastbourne Crematorium, a growing number of applications and medical certificates require scrutiny and not infrequently follow-up enquiries before the appropriate authority to cremate is issued.

The following statistics of certificates signed since the Crematorium opened in 1960.

1960	..	..	872	1964	..	..	1,494
1961	..	..	1,078	1965	..	..	1,542
1962	..	..	1,295	1966	..	..	1,624
1963	..	..	1,459	1967	..	..	1,713
				1968	..	..	1,956

METEOROLOGY

Borough Meteorologist: W. L. PECK

January was dull and cold for the first two weeks with slight snow falls on several occasions. Milder conditions prevailed for the remainder of the month with fog and mist being much in evidence during the third week.

February was generally colder than average, although snow only fell slightly on two occasions. During the last week of the month very sunny conditions prevailed though temperatures were still low.

Sunshine during March was above average particularly during the last half of the month. Rainfall was well below average and temperatures near to average.

Some slight snow showers occurred during the first week of April followed by a dry fine spell until mid-month. During the latter part of April milder conditions prevailed and an unsettled spell occurred at the end of the month.

Conditions during May were generally wet and cold, temperatures and sunshine being below average, and rainfall above average.

Conditions during June were dry and sunny during the first two weeks, but unsettled and cooler conditions with strong winds occurred during the latter half of the month.

After a promising start during the first week in July, the remainder of the month was generally rather dull, with temperatures below average.

August proved to be the most disappointing of the summer months. The sunshine total was one of the lowest ever recorded, only three years in the 76 year period recorded having had a lower total. Rain fell on most days during the first three weeks of the months although temperatures were up to average.

Much sunnier conditions were experienced in September, although rainfall fell on most days during the last three weeks accompanied by strong winds.

Mild but dull conditions prevailed during October, and these conditions persisted throughout November but with much less rainfall, but stronger winds.

December began and finished dry and cold, the first slight snowfall of the winter occurring on the 29th. During the second and third weeks

conditions were milder, wet with strong and gale force winds being much in evidence.

Summary of Observations

AIR PRESSURE (MEAN SEA LEVEL)

Daily average:

9 a.m.	..	..	..	..	30.017 inches
9 p.m.	..	..	..	..	30.016 "

AIR TEMPERATURE

Daily average:

Maximum	..	..	..	..	55.0 degrees
Minimum	..	..	..	..	46.0 "
Combined	..	..	..	..	50.5 "
Range	..	..	..	..	9.0 "
At 9 a.m.	..	..	..	..	50.7 "
At 9 p.m.	..	..	..	..	50.3 "
Warmest day: 26th and 27th August	..	..	..	..	75.0 "
Warmest night: 2nd July	..	..	..	..	64.0 "
Coldest day: 28th December	..	..	..	..	34.0 "
Coldest night: 15th December	..	..	..	..	23.0 "

SUNSHINE

Total	..	..	..	..	1663.5 hours
Daily average	..	..	..	..	4.55 "

RAINFALL

Total	..	..	..	..	28.78 inches
"Rain" days	..	..	..	..	165 days

HUMIDITY

Daily average:

9 a.m.	..	..	..	..	86 per cent.
9 p.m.	..	..	..	..	88 "

WINDS

Percentage of 9 a.m., 6 p.m. and 9 p.m. observations:

<i>Direction</i>	<i>Percentage</i>
N.	15.12
N.E.	5.83
E.	10.66
S.E.	7.29
S.	8.92
S.W.	8.47
W.	25.68
N.W.	12.93
Calm	5.10
Prevailing Winds	West
Snow and sleet recorded on	5 days
Thunderstorms recorded on	6 "
Fog (9 a.m.) recorded on	10 "
Gales recorded on	5 "
Air frost recorded during	28 "
Ground frost recorded during	63 nights

Monthly Averages for 76-year Period 1888-1968

(Excluding War Years—1942-46 no observations)

Month	Air Temperature					Mean Sea Temperature	Sunshine		Rainfall	
	Means of			Highest recorded	Lowest recorded		Total hours	Daily hours	Inches	'Rain' Days
	Maximum	Minimum	Max. and Min. Combined							
January	45.2	36.7	40.9	56 1922 1923	12 1940	42.3	62.4	2.01	2.98	16
February	45.1	36.5	40.8	58 1897	15 1929 1947 1956	41.2	82.9	2.96	2.24	14
March	48.3	38.2	43.3	66 1929	18 1909	42.8	138.1	4.45	2.18	13
April	52.9	41.5	47.2	72 1924	27 1922	46.9	178.3	5.94	1.97	12
May	59.0	47.1	53.0	78 1922	32 1935 1941 1967	52.9	234.4	7.56	1.71	11
June	63.9	52.1	58.0	86 1957	38 1932	58.6	239.4	7.98	1.83	11
July	67.1	56.0	61.6	90 1911	43 1919	62.6	234.8	7.57	2.25	11
August	67.5	56.3	61.9	86 1947	41 1907	63.7	217.4	7.01	2.65	14
September	64.6	53.0	58.8	82 1929	37 1919	61.3	174.2	5.81	2.54	12
October	58.2	47.6	52.9	71 1921	28 1931	56.0	123.0	3.97	3.89	16
November	51.3	42.1	46.7	63 1927	25 1923	49.8	70.8	2.36	3.82	16
December	46.9	38.7	42.8	59 1907	17 1908	45.3	54.5	1.76	3.62	17
Year	55.8	45.5	50.7	90	12	52.0	1810.2	4.96	31.68	163

Monthly Averages, 1968

Month	Air Temperature					Mean Sea Temperature	Sunshine		Rainfall	
	Means of			Highest recorded	Lowest recorded		Total hours	Daily hours	Inches	'Rain' Days
	Maximum	Minimum	Max. and Min. Combined							
January	44.6	36.3	40.5	52	26	41.5	55.9	1.80	3.25	16
February	42.8	34.8	38.8	47	28	41.1	92.5	3.19	2.65	15
March	49.1	40.2	44.7	59	31	42.0	162.7	5.25	0.84	14
April	52.6	41.1	46.9	68	31	47.1	204.2	6.81	2.81	13
May	56.3	46.4	51.4	64	40	52.2	219.8	7.09	2.11	12
June	63.3	52.9	58.1	70	46	58.5	214.0	7.13	1.71	14
July	66.1	54.9	60.5	73	48	61.9	206.7	6.67	2.01	13
August	67.1	56.8	62.0	75	51	62.6	149.4	4.82	2.31	16
September	64.2	55.0	59.6	67	49	62.1	174.1	5.80	4.62	18
October	60.7	53.8	57.3	65	46	58.6	85.0	2.74	3.63	12
November	49.8	42.8	46.3	60	31	50.3	54.5	1.82	0.90	10
December	43.2	36.4	39.8	54	23	44.8	44.7	1.44	1.94	12
Year	55.0	46.0	50.5	75	23	51.9	1663.5	4.55	28.78	165

SUNSHINE

The position of resorts in southern districts were as follows:

<i>Position in List</i>	<i>Town</i>	<i>Total Hours</i>
1	Swanage	1734.4
3	Bognor Regis	1712.3
4	Lizard	1710.4
5	Brighton	1693.7
6	Penzance	1678.5
7	EASTBOURNE	1663.5
8	Weymouth	1657.2
9	Southsea	1656.2
10	Littlehampton	1652.0
12	Torquay	1644.5
13	Worthing	1643.5
15	Hayling Island	1638.0
19	Bournemouth	1615.9
20	Teignmouth	1605.0
21	Falmouth	1603.0
26	Ilfracombe	1579.9
30	Newquay	1563.8
36	Bexhill	1543.8
50	Folkestone	1504.2
55	Hastings	1495.1

1968 Monthly Variations from Averages

	<i>Maximum Temperature °F.</i>	<i>Minimum Temperature °F.</i>	<i>Sea Tempera- ture °F.</i>	<i>Sunshine Hours</i>	<i>Rainfall Inches</i>
January ..	-0.6	-0.4	-0.8	- 6.5	+0.27
February ..	-2.3	-1.7	-0.1	+ 9.6	+0.41
March ..	+0.8	+2.0	-0.8	+24.6	-1.34
April	-0.3	-0.2	+0.2	+25.9	+0.84
May	-2.7	-0.7	-0.7	-14.6	+0.40
June	-0.6	+0.8	-0.1	-25.4	-0.12
July	-1.0	-1.1	-0.7	-28.1	-0.24
August ..	-0.4	+0.5	-1.1	-68.0	-0.34
September ..	-0.4	+2.0	+0.8	- 0.1	+2.08
October ..	+2.5	+6.2	+2.6	-38.0	-0.26
November ..	-1.5	+0.7	+0.5	-16.3	-2.92
December ..	-3.7	-2.3	+0.5	- 9.8	-1.68
Year ..	-0.8	+0.5	-0.1	-146.7	-2.90

SCHOOL HEALTH SERVICE

CONTENTS

1. Statistics
2. School Hygiene
3. Medical Inspections and Consultations
4. Work of the School Nurses
5. Arrangements for Treatment
6. Child Guidance and School Psychological Service
7. Handicapped Children
8. Special Tuition
9. Dental Clinic
10. Families with Difficulties and Problems
11. Employment of Children
12. Provision of Clothing
13. School Meals and Milk
14. Notification of Infectious Disease
15. Tuberculosis
16. Vaccination and Immunisation
17. Colleges of Education
18. Co-Ordinating Committee, Annual Report

ANNUAL REPORT

The School Health Service seems to have sailed through 1968 relatively unscathed by the Green Paper on the unification of the National Health Service or by the Seebohm report on the organisation of Local Authority Social Services. However, in our own Health Department it has been the subject of a take-over bid by the newly created Medical Services Section which has united the Maternal and Child Health, Immunisation, Student Health and School Health work into one administrative block.

Of the 7,135 children on roll, 1,366 have had full medical examinations, and the general physical condition of all but one was satisfactory. 133 children are registered as handicapped, and of these 17 are at residential schools, a figure that varies little from year to year. The following pages show the work that lies behind these statistics, about which there are a few points which deserve special mention.

Selective Examinations and Physical Education Surveys.

These surveys, made by Medical Officers, were introduced some nine years ago, when the routine examination of 10-year-olds was abandoned. Figures show diminishing returns from these time-consuming activities so they have been stopped for 1969 and a watch is being kept to see whether the cases requiring help are brought to light by other means.

Annual vision testing is being continued. This is also a time-consuming activity but, contrary to what might be thought, a surprisingly large number of children developing eye defects are not referred by school or parents until their vision is very poor indeed. This was put to the test in 1968 when the annual vision test at the Grammar school was missed. The year 1969 has produced a crop of really bad cases requiring spectacles at that school. No harm has been caused to the eyes, but clearly it is an educational handicap.

Obesity. The number of children attending the slimming clinic has increased to 44. In addition to the pressures on the child imposed by sweet-eating friends and the ice-cream van parked outside the school gate, we have in Eastbourne an occupational hazard to children whose parents are boarding-house proprietors. Naturally the children eat up the delicacies left by the guests, and these children are at special risk of becoming seriously overweight. In some schools, overweight children are almost the norm, and parents are approaching our Medical Officers asking whether their normal children are underweight.

Child Guidance and School Psychological Service. The number of children referred to the part-time Educational Psychologist is also increasing, and the waiting list rises to a peak of about fifty each year. This means a delay of about six months between referral and report. With a national shortage, there seems little hope of recruiting a second

part-time psychologist to fill the establishment. Similarly, the lack of a social worker in the Child Guidance Clinic since August has seriously impeded the diagnostic and treatment side of the work. Knowledge of the dynamics of a family situation, and the ability to help parents gain insight into, and tolerance of, the way children react are absolutely fundamental to the modern family-centred approach.

Dental. Mr. Berry, our Principal Dental Officer, retired at the end of the year. My thanks to him are recorded in the Report of the Medical Officer of Health.

Fluoridation. Commencing in 1964, two of our secondary schools took part in a piece of research work on fluoridated toothpastes run by the Department of preventive dentistry of the London Hospital Dental School. The research is now completed, but the results are not yet available. However, we must remember that the advantages of fluoride whether contained in toothpaste, tablets, drops or in drinking quantities of tea, are only conferred on those children who take it. However, until such time as the fluoride level of the drinking water is adjusted to the optimum level, the use of fluoride drops for babies, and fluoride tablets or toothpaste for older children, does represent a worthwhile way in which conscientious parents can help to preserve their children's teeth.

EDUCATION COMMITTEE

(as constituted at 31st December, 1968)

The Mayor:

MR. COUNCILLOR C. J. SCOTT, J.P.

Chairman:

MR. ALDERMAN S. M. CAFFYN, C.B.E.

Deputy Chairman:

MR. COUNCILLOR C. H. LACEY

Councillors:

A. G. BANFIELD
S. W. E. BOUGHTON
L. J. CAINE
J. R. ELPHICK
T. G. FORD
W. J. EVENDEN
MRS. U. E. G. GARDNER
J. W. E. HOWLETT
W. P. LEBBON
C. V. HORRIDGE
MRS. M. W. RICE-PYLE
R. POYNTER
MRS. E. F. M. WHITE

Co-opted Members:

REV. CANON W. W. S. MARCH
REV. CANON T. J. LYNCH
REV. D. J. BOYS
MR. J. W. BALL
MR. A. G. RUSSELL
MRS. M. F. WIGHAM

SCHOOL HEALTH SERVICES

(a) **Full-time Officers** (as at 31st December, 1968)

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:

WALTER JAMES WIGFIELD, M.A., M.B., B.Chir., D.P.H.

Senior Medical Officer:

MARJORIE I. GODSON, M.B., Ch.B., D.P.H., C.R.P.

Medical Officer:

MARY B. SIMPSON, M.B., Ch.B., D.A., D.P.H.

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. V. M. BERK, S.R.N., H.V.Cert.
MRS. D. I. DALE, S.R.N., S.C.M., H.V.Cert.
MISS E. E. GRIFFIN, S.R.N., S.C.M., H.V.Cert.
MISS B. J. HUDSON, S.R.N., S.C.M., H.V.Cert.
MISS N. HAMILTON MOSS, S.R.N., S.C.M., H.V.Cert.
MISS A. M. RANKS, S.R.N., S.C.M., H.V.Cert.
MRS. E. L. SNASHALL, S.R.N., H.V.Cert.
MISS B. G. STEVENS, S.R.N., S.C.M., H.V.Cert.
MRS. S. M. TENNANT, S.R.N., H.V.Cert.
MRS. M. F. TOMSETT, S.R.N., H.V.Cert.
MISS H. M. PATTERSON, S.R.N., H.V.Cert.

Clinic Assistant:

MRS. J. NETHERCOTT

Speech Therapist:

MRS. K. HANSFORD, L.C.S.

Clerical Staff:

MISS B. DOUCH (Senior)
MRS. G. M. MORRIS
MRS. J. C. RUDMAN
MISS J. A. DOUGLAS

Dental Surgery Assistants:

MISS K. J. FARRINGTON
MISS K. A. LAMBERT
MRS. D. ANDREWS

Dental Anaesthetists:

DR. MARJORIE I. GODSON
DR. MARY B. SIMPSON

Child Guidance and School Psychological Service:

MISS M. P. LOGG, B.A., Dip.Psych., A.B.Ps.S., Educational Psychologist
MRS. S. M. HOOK, Clerk

**Officers attending Clinics by arrangements with the
South-Eastern Metropolitan Regional Hospital Board**

Consultant Orthodontic Surgeon:

D. G. F. ARDOUIN, F.D.S., D'Orth., R.C.S.

Psychiatrist:

HUGH V. W. ELWELL, M.A., L.R.C.P., M.R.C.S., D.P.M.

CLINICS

The various Clinics were held as follows:

Speech Therapy

Acacia Villa	Friday, a.m.
Avenue House	Tuesday, a.m.
	Thursday, 2.15 p.m. to 7 p.m.
Hampden Park Infants' School ..	Weekly sessions
The Lindfield School	Weekly sessions
Bourne Infants' School	Weekly sessions
The Downs School	Weekly sessions
Motcombe Infants' School ..	Weekly sessions

Child Guidance

Avenue House	Wednesday, 10 a.m. to 8 p.m. and
Psychiatrist	Fridays, 10 a.m. to 1 p.m.
Educational Psychologist ..	Wednesday, 9.30 a.m. to 7.30 p.m.
	Fridays and alternate Tuesdays, 9.30 a.m. to 4.30 p.m.

Ophthalmic

Princess Alice Hospital	Special sessions fortnightly, Friday, 1.45 p.m.
-------------------------------	--

Dental

Avenue House	Daily, 9 a.m. and 2 p.m.
Anaesthetic sessions	Monday and Friday, 9.30 a.m.

Chiropody

District clinics as and when required

Remedial exercises (during school term)

Avenue House	Friday mornings, 9 to 10 a.m.
--------------------	-------------------------------

Slimming

Avenue House	Tuesday, 4.30 p.m.
--------------------	--------------------

1. STATISTICS

The number of children on the school registers on reopening in January was 7,101 and 7,135 by the end of the year. There were 1,221 children admitted during the year and the net increase compared with the end of 1967 was 242.

The average attendance of children for the year was 6,661 a percentage of 93.00.

TOTAL NUMBER OF CHILDREN

At Primary Schools	4,134
At Secondary Schools, including Grammar Schools ..	2,906
At Special Schools	95
	<hr/>
Total ..	7,135
	<hr/>

2. SCHOOL HYGIENE

(a) *Environment*

It is pleasing to report that a high standard of hygiene has been observed by the medical staff and public health inspectors during their visits and particular comment has been made of the very high standards in the school canteen kitchens. The high standard observed by caretakers, school cleaners and kitchen staff is a commendable form of health education.

(b) *Personal Hygiene*

Selective inspections totalling 10,485 were made to determine the cleanliness and general state of health of pupils. The number of children found to be infested with nits or head lice increased to 29.

(c) *Health Education*

All four secondary modern schools have continued to make use of the resources of the health education section, the emphasis being on a course of from six to ten lessons into which most aspects of personal health can be brought. Mothercraft courses for senior girls were again requested from two of the secondary schools.

Weekly health education lessons at the Lindfield Special School have been continued by the Senior Health Visitor.

No requests for help have been received from Infant or Junior schools.

In an attempt to place Health Education on a more secure footing, an attempt is being made to persuade schools to appoint a Health Education co-ordinator whose task would be to ensure that the subject was integrated into the whole school curriculum instead of competing with other subjects for a place on the time-table.

3. MEDICAL INSPECTIONS AND CONSULTATIONS

ROUTINE MEDICAL INSPECTION

The routine inspection of infants is delayed until their third term in school which allows parents and teachers the opportunity of assessing the child's acceptance of school life and also enables the school nurse to test both vision and hearing (using the pure tone audiometer) so that more information is available for the school medical officer when the examination is made.

Fourteen-year-olds are also given routine medical examinations when the emphasis is on fitness for ordinary working life. The boys are given colour vision tests.

The Head Teachers, who naturally have the children under constant observation, assist greatly by returning forms to the Department indicating defects or problems which they have noticed in children due for medical inspection or reinspection or whom they wish to be examined. During the year fifty-one such forms were returned.

The total number of children examined was 1,366 of whom 393 had defective vision or other significant defects requiring treatment (excluding dental disease). These figures include entrants into the area who were not up to date with their medical examinations and examinations given to pupils remaining at school beyond the school-leaving age.

An assessment of each child's physical condition was made. 99.93 per cent (1,365) children were classified as being satisfactory.

SCHOOL SURVEYS

The intermediate age groups are not medically examined *en bloc* but are surveyed by the School Medical Officer during normal Physical Education lessons. As a result of this, 69 children were noted as having defects and subsequently examined.

QUESTIONNAIRES

Health questionnaires were sent to parents and teachers of children in their second term at Secondary School, with the request that they be completed and returned if the advice of the School Medical Officer was required. Thirty-four requests were made for advice.

OTHER EXAMINATIONS

School Medical Officers visit each school every term to examine children about whom parents, teachers or the school nurse request advice. Two hundred and sixty-seven children were brought to notice in this way. Follow-up examinations of children with defects found at earlier inspections totalled 1,697. Consultations and examinations were also carried out at school clinics when necessary.

Parents sometimes overlook the fact that the School Health Service is concerned with the whole child, physically, mentally and

socially. Any troubles affecting the child at home produce repercussions at School. Advice and guidance are readily available and those dealing with children are encouraged to ask for help.

INDEPENDENT SCHOOLS

Whilst the Independent Schools do not participate in the formal arrangements for school medical examinations, the School Health Service is used freely in respect of individual services such as Child Guidance, Speech Therapy, Ascertainment of Handicaps, Immunisation and the prevention or spread of communicable disease.

4. WORK OF SCHOOL NURSES

	<i>Sessions</i>
Medical Inspections	169
Preparation for Medical Inspections	11
Hygiene Inspections	98
Vaccination, Immunisation and B.C.G. in Schools ..	39
Audiometric Testing	44
Vision Testing	95
Dental Clinics	101
Minor Ailments Clinics	391
Health Education in Schools	164
	<i>Visits</i>
Home Visits to Schoolchildren	490
Other School Visits	112

5. ARRANGEMENTS FOR TREATMENT

Children with defects are referred to their family doctors, to hospital for specialist opinion or the School Clinic for treatment of minor ailments and other special defects.

MINOR AILMENT CLINICS	1967	1968
Total number of children who attended ..	448	517
Total attendances made	2,321	2,909
Total number of defects treated	453	553
Conditions treated:		
Ringworm	—	1
Impetigo	28	27
Eye disease (external)	19	16
Ear disease	—	6
Other skin diseases (boils, septic conditions, etc.)	231	259
Miscellaneous (sprains, burns, cuts, etc.) ..	168	236
Pediculosis	2	8
	<hr/>	<hr/>
	453	553
	<hr/>	<hr/>

CHIROPODY

The Department's chiropodists attend to children's feet where necessary. During the year 32 children made 119 attendances for the treatment of corns, callosities and minor foot defects.

VISUAL DEFECTS

Towards the end of the year there was a change in policy concerning treatment for children with eye defects. Hitherto a senior child thought to have a simple refractive error was referred to an ophthalmic optician chosen by the parents. From December all children up to the age of 14 referred for eye testing for the first time were sent to the Hospital Eye clinic, but to cut the waiting list, subsequent examination for children with a straightforward refractive error are given the option of being transferred to opticians once the child has reached his tenth birthday.

During 1968, 134 children were referred to opticians by School Medical Officers and School Nurses. I would like to thank the local ophthalmic opticians who have co-operated by submitting reports on the children they examined.

During 1968, 148 forms for the repair or replacement of spectacles under the National Health Service were issued to children.

EYE CLINIC

This takes place at the Princess Alice Hospital under the supervision of Mr. F. N. Shuttleworth, D.O.M.S., Consultant Ophthalmic Surgeon. Orthoptic and other specialist treatment is available at this Clinic and there is still a waiting list of children overdue for review.

	<i>New Cases</i>		<i>Old Cases</i>	
	<i>1967</i>	<i>1968</i>	<i>1967</i>	<i>1968</i>
Number of cases referred to Ophthalmic Clinic	138	145	166	175
Number of attendances made ..	166	190	171	176
Glasses prescribed	85	85	85	18

AUDIOMETRY AND EAR, NOSE AND THROAT DEFECTS

During the year 802 children were given a preliminary hearing test in school using pure tone audiometers. 586 passed this test and 216 failed. 328 children were retested and in 180 cases hearing was satisfactory. Many of the 148 remaining cases were found to have recurrent deafness caused by catarrh and are being kept under observation.

As a result of tests thirty-five children were referred to the Ear, Nose and Throat Department of the local hospitals.

The arrangements for screening pre-school children for hearing defects have been continued, and a register maintained of those who are at special risk of being deaf.

Supervision of children wearing hearing aids in school has been continued so far as is possible by the school medical officers, but serious concern is felt at the lack of adequate supervision due to the absence of a teacher of the deaf. Some of these children really need individual speech training, and help in language development and comprehension, which is beyond the scope of work in a normal school classroom.

ORTHOPAEDIC DEFECTS

As a result of the annual surveys, periodic medical inspection and reinspections arranged during the year the following children with faulty posture and defective feet were referred for remedial exercises.

	<i>Breathing Exercises</i>	<i>Postural Exercises</i>	<i>Foot Exercises</i>
Infant and Junior Schools ..	27	7	151
Secondary Schools ..	2	5	11
Avenue House Clinic ..	2	—	20
	—	—	—
	31	12	182
	—	—	—

The exercises were given by third-year students of Chelsea College of Physical Education as far as availability of students permitted and I am most grateful to the Principal for this facility and to Miss A. E. Gregory who made the detailed arrangements with the schools concerned.

OTHER DEFECTS

Enuresis. In the course of the year thirteen children have borrowed electric alarm pad units. Six children are now cured and one was unable to cope with the alarm device. Two improved.

Overweight. Forty-four overweight children were referred to the Slimming Clinic during the past year, where parents and children received help and encouragement from the School Nurse. The children are weighed and their eating habits discussed. Progress is supervised by the School Medical Officer. Eleven children referred in the previous year continued to attend.

This work is essentially a part of Health Education and it is hoped that the habit of sensible eating, formed by attendance at the clinic, will prevent these children with a tendency to become fat from growing into chronically overweight adults.

REPORT OF THE SPEECH THERAPIST (MRS. K. HANSFORD, L.C.S.T.)

Throughout the year clinic sessions were held at Avenue House and Acacia Villa; during school terms the following schools were visited weekly:

<i>School</i>	<i>Sessions</i>	<i>Number attending</i>	<i>attendances</i>
Downs School	32	8	160
Lindfield	68	21	377
Motcombe	35	25	399
Hampden Park Infants School ..	34	38	465
Bourne Infants School ..	35	16	247
Avenue House and Acacia Villa ..	189	34	442
	<hr/>	<hr/>	<hr/>
	393	142	2,090
	<hr/>	<hr/>	<hr/>

Total number of children of school age treated during 1968	142
Number of attendances	2,090
Number of children under school age treated during 1968	32
Number of attendances by under school age children	521
Number of cases of school age but not attending school	3
Attendances made	70
Total number of new cases referred during the year	65
Total number of cases discharged	55

<i>Type of defect treated in children of school age</i>	<i>Cases</i>
Dyslalia	44
Cleft palate	3
Stammer	9
Sigmatism	19
Delayed speech	5
Other defects	62
	<hr/>
	142
	<hr/>

<i>Type of defect treated in children under school age</i>	<i>Cases</i>
Dyslalia	15
Cleft palate	1
Stammer	3
Delayed speech	7
Other defects	6
	<hr/>
	32
	<hr/>

6. EASTBOURNE CHILD GUIDANCE CLINIC AND SCHOOL PSYCHOLOGICAL SERVICE

(a) CHILD GUIDANCE CLINIC

Number of new cases referred in 1968	65	
Number of cases re-referred in 1968	28	
	—	93
Number of cases carried forward from 1967 ..		6
Cases withdrawn before diagnostic interview ..		11
Number of cases on waiting list		6

Sources of referral

School Medical Officers	43	
Schools	9	
Private doctors	15	
Parents	14	
Children's Officer	7	
Educational Psychologist	4	
Other sources	1	
	—	93
Transferred from Bexhill Clinic		2

Problems:

Personality Disorder	14	
Nervous Disorder	14	
Habit Disorder	10	
Behaviour Disorder	51	
Advice for Placement	6	
Examination for Court	3	
Educational	3	

How dealt with:

Psychiatric Treatment	34	
Periodic Supervision	11	
Advice	21	
Referred to Educational Psychologist	4	
Referred to Social Worker	12	
Awaiting Diagnostic Interview	6	
	—	88

Summary of work carried out:

Psychiatrist

Diagnostic Interviews	81	
Treatment Interviews	471	

Psychologist

Interviews for tests	47	
Interviews with parents	14	
School visits	10	
Home visit	1	

Social Worker (1.1.68–2.8.68)

Interviews in Clinic	..	..	..	103
Home and other visits	..	..	..	133
Social Histories	..	..	..	36

Analysis of Treatment Cases closed during the year

(i.e. old and new cases seen by Psychiatrist in 1968 and previous years and discharged during 1968 according to the following categories):

Discharged—Improved	..	..	..	33
Not improved	..	..	..	10
After advice	..	..	..	9
Transferred	..	..	..	9
Unco-operative	..	..	..	15

(b) SCHOOL PSYCHOLOGICAL SERVICE

Number of new cases referred during 1968	..	69	
Number of cases re-referred during 1968	..	20	
		—	89
Number of cases carried forward from 1967	..		5
Number of cases moved from area	..	..	2
Number of cases not tested	..	..	3
Number of cases on waiting list	..	..	31

Sources of referral:

School Medical Officers	..	..	..	23
Schools	..	..	..	63
Parents	..	..	..	2
Chief Education Officer	..	..	..	1
			—	89
Number of cases seen during 1968	..	..	..	86

How dealt with:

Advice only	..	..	..	11
Placement in E.S.N. School recommended	..	..	..	14
Placement in J.T.C. recommended	..	..	..	2
Other placement recommended	..	..	..	10
Remedial teaching undertaken	..	..	..	3
Kept under observation	..	..	..	15
Referred to Child Guidance Clinic	..	..	..	3

Summary of work carried out:

Interviews for tests	..	..	..	89
Interviews with parents	..	..	..	18
Remedial Teaching interviews	..	..	..	242
School visits	..	..	..	51
Home and other visits	..	..	..	26

Analysis of Redmedial Teaching cases:

Number in attendance during 1968	..	..	14
Number discharged improved	..	..	1
Number discharged not improved	..	..	1
Number unwilling to continue	..	..	3

7. HANDICAPPED CHILDREN

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

	<i>In Residential Special Schools</i>	<i>In Day Special Schools</i>	<i>In Ordinary Schools</i>	<i>In Hospital Schools</i>	<i>At Home</i>	<i>Total</i>
Partially sighted	1	—	2	—	—	3
Blind	2	—	—	—	—	2
Partially Hearing	3	—	13	—	—	16
Deaf	5	—	—	—	—	5
Delicate	—	4	2	—	1	7
Physically Handicapped	3	8	2	3	1	17
Educationally Sub-normal ..	3	71	—	—	—	74
Epileptic	—	1	1	—	—	2
Maladjusted	—	2	—	—	—	2
Speech	—	5	—	—	—	5
	17	*91	20	3	2	133

**This total includes three children from other authorities*

EPILEPTICS

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

CHILDREN FOUND TO BE UNSUITABLE FOR EDUCATION AT SCHOOL

Number of children who were the subject of new decisions recorded under Section 57 of the Education Act 1944	..	..	..	..	..	1
Number of children reviewed under the provisions of Section 57A of the Education Act 1944	..	..	..	..	..	—
Number of decisions cancelled under Section 57A (2) of the Education Act, 1944	..	..	..	..	..	—

8. SPECIAL TUITION

At Home. Tuition was given to one child suffering from psychiatric disorder.

In Hospital. Tuition was given to six children whilst they were in hospital.

9. DENTAL CLINIC

REPORT OF THE PRINCIPAL SCHOOL DENTAL OFFICER MR. M. G. BERRY, L.D.S., R.C.S.

SESSIONS

The number of sessions devoted to inspection and treatment were:

The Principal School Dental Officer	..	..	402
School Dental Officer	..	..	432

Of these 46 sessions were devoted to inspections and 788 to treatment.

GENERAL SERVICES

At the 46 sessions devoted to Dental Inspections 5,629 children were seen in the following age groups:

Age	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	Total
<i>Number Inspected</i>	80	421	477	415	507	487	515	509	539	531	570	370	100	74	25	9	5,629

Of these, 2,088 (37 per cent) were found to require treatment and 1,674 individual children actually received treatment during the year.

The following is a summary of the treatment given:

Fillings:

Permanent teeth	..	..	..	..	2,163
Temporary teeth	..	..	..	..	101
					2,264

Number of teeth filled:

Permanent teeth	..	..	..	..	1,888
Temporary teeth	..	..	..	..	99
					1,987

Extractions:

Permanent teeth	..	..	..	..	440
Temporary teeth	..	..	..	..	1,272
					1,712

Administration of General Anaesthetics	..	..	854
Number of artificial dentures constructed	..	..	10
Number of children X-rayed	..	..	182
Scaling and Gum treatment	..	..	140
Teeth conserved by silver nitrate	..	..	96

During the year, routine dental inspections were carried out, on the school premises at all but three of the schools maintained by the Authority. The delay in respect of the three schools was due to dental staff illness, and it is hoped that inspections will be carried out at these schools early in 1969.

At these inspections 5,629 children were examined, of whom 2,088 were found to require treatment and 1,674 were actually treated. These routine inspections occupied 46 sessions, and 788 sessions were devoted to treatment. The figure of 37 per cent referred for treatment compares very favourably with the national average and indicates the general satisfactory dental conditions of the children here.

The number of cases where extensive work is necessary is diminishing, although constant watch has to be kept, particularly on the older age groups, to diagnose and treat early interstitial caries.

2,163 fillings were inserted into permanent teeth and 101 in temporary teeth. Extractions totalled 1,712, of which 440 were permanent teeth. The majority of these extractions were carried out under general anaesthesia, nitrous oxide and oxygen with the additional use at times of either a Trilene or Halothane vapouriser. These general anaesthetics were administered on 853 occasions.

To replace the loss of permanent teeth, usually the upper front teeth damaged beyond repair in accidents, 10 artificial dentures were constructed. The department is equipped with its own X-ray apparatus, and radiological examinations were carried out on 182 children.

The orthodontic department, although under the Regional Hospital Board, continues to hold clinics at Avenue House, an arrangement that enables us to maintain a close liaison with the orthodontic consultant, Mr. D. G. F. Ardouin.

In the realm of Dental Health Education, we are greatly indebted to Miss M. G. Hemming, for her enthusiasm and hard work in organising the visit of Pierre the Clown to fourteen of our Infant and Junior schools. Pierre the Clown emphasises the importance of dental health by a well balanced mixture of humour and sound advice. He demonstrates with a piece of chocolate or licorice how sweets, cakes and similar foods cling to the teeth causing decay. He then shows how, by chewing a piece of raw apple, these food deposits are cleared away. The close and wrapt attention of all his audiences, made one feel that, particularly in the case of the younger age groups, this was an ideal method of encouraging a high degree of oral hygiene, and far more likely to be effective than a mere straight-forward and perhaps dull lecture.

10. FAMILIES WITH DIFFICULTIES AND PROBLEMS

Report of Senior Inspector S. J. Flory, N.S.P.C.C. of the Eastbourne and Lewes District Branch for the year 1968.

During this period 52 new cases were investigated affecting the Welfare of 128 children and involving 71 offenders or persons advised.

Classification of cases:

Neglect	..	..	..	..	..	33
Assault or Ill-Treatment		..	..	..	..	8
Aid or advice sought	..	..	..	..	..	11

Cases reported by:

General Public	..	..	..	..	..	26
Police	..	..	..	..	..	6
Other Officials	..	..	..	..	..	20

Details of the children:

68 boys. 60 girls.

Thirty-six of the above being under the age of 5 years

Offenders or persons advised:

32 male. 39 female.

Cases dealt with:

Warned, 41. Advised, 11.

During the above period 552 supervisions were paid to cases under notice, and 345 miscellaneous visits of enquiry were also undertaken.

In closing my report I would like to thank all the Local Authorities and other voluntary organisations for their close co-operation in the field of Child Welfare.

11. EMPLOYMENT OF CHILDREN

The Department notified the Youth Employment Service of 419 children attending Secondary Modern Schools who had had their final school medical examination and were fit for all types of employment. Form Y.9 was issued in respect of thirty-three children, indicating types of employment for which they were not suitable.

To comply with the Bye-Laws regulating the employment of children of school age, a medical certificate must be produced stating their employment will not be prejudicial to the child's health and development and will not render them unfit to benefit from the child's health and development and will not render them unfit to benefit from their education. 168 such certificates were completed and sent to the Youth Employment Officer.

12. PROVISION OF CLOTHING

EDUCATION (MISCELLANEOUS PROVISIONS) ACT 1948 SECTION 5

Various articles of clothing were supplied by the Education Authority to 115 children from 68 families.

13. SCHOOL MEALS AND MILK

During this period the total number of meals served was 988,764, of which 103,563 were free meals.

During the year 1967 the total number of meals was 919,760, of which 48,920 were free.

*The milk in schools scheme from September 1968, supplies free $\frac{1}{2}$ pt. milk to children desirous of taking it, in the Junior and Infant Schools only. The table shows the percentage of children in this age group who took milk on one day in October last.

	PRIMARY AND SECONDARY SCHOOLS					
	<i>A day in October</i>	<i>No. of Children in School</i>	MEALS			MILK
<i>Free</i>			<i>Paid</i>	<i>Percentage taking Meals</i>	<i>Total taking Milk in Infant and Junior Schools</i>	<i>Percentage taking Milk</i>
1969	7,145	611	4,563	70.20	3,702*	90.20
1967	6,880	263	3,832	60.96	5,266	76.03

*Total number of children in Infant and Junior Schools, 3,910.

14. NOTIFICATION OF INFECTIOUS DISEASES

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

Scarlet Fever	6
Measles	65
Food Poisoning	—
Dysentery	—
Tuberculosis (Non-Respiratory)	—
Whooping Cough	1

15. TUBERCULOSIS

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

B.C.G. VACCINATION AGAINST TUBERCULOSIS

For some years children known to be contacts of cases of tuberculosis have been offered this vaccine by the Chest Clinic as a routine preventive measure. Fifteen children of school age were thus vaccinated.

In addition B.C.G. vaccination has been offered to children of thirteen years attending both Local Authority and private schools, and to students attending colleges of further education.

Details of children and students taking advantage of the scheme are as follows:

	<i>Skin Tested</i>	<i>Vaccinated</i>
Children in School	554	538
Students	29	20

16. VACCINATION AND IMMUNISATION

The Local Health Authority arranged for school children to receive vaccination and immunisation against smallpox, diphtheria, whooping cough, tetanus and poliomyelitis. Statistics relating to the protection of school age children are given in the relevant section of the Medical Officer of Health's Annual report.

17. COLLEGES OF EDUCATION

The Department has been privileged to continue to assist with administrative medical problems as they arise in the Colleges.

In the past, valuable help has been given by staff and students of Chelsea College who have run remedial exercise classes for children needing help. Following changes in the curriculum, the number of students available for this work has dropped sharply, and this is reflected in a much reduced number of children who attend these exercise classes. We are also grateful for the help given by students and staff to the children attending our special schools, and at the handicapped children's swimming club held at Chelsea College Baths.

18. ANNUAL REPORT OF THE CHILD WELFARE CO-ORDINATING COMMITTEE, 1968

Membership

The Committee's purpose is to co-ordinate the local social services for families with children. Those needing help are allocated to the most appropriate case worker to ensure personal interest and continuity of care, and a register of families with their case workers is maintained to facilitate channelling of information. Monthly case conferences are held, supplemented by individual case discussions when necessary. Field workers include the Children's Officer, Education Welfare Officer, Superintendent Health Visitor, Special Health Visitor, Housing Manager, N.S.P.C.C. Inspector, Probation Officers, Moral Welfare Worker, Social Worker from the Child Guidance Clinic and Mental Welfare Officer. These are joined by an Assistant Solicitor to the Town Clerk, Home Help Organiser and Representatives from the Ministry of Social Security, and the Borough Treasurer. The Deputy Medical Officer of Health has taken the chair at the monthly Committee Meetings.

Allocation of Families

When a statutory service is supervising a family by Court Order the case worker is always chosen accordingly. In other cases the choice depends on the particular problems of the family and the ages of the children. The Officers of the Children's Department are responsible for about half of the families on the register, and for two-thirds of the families with severe problems which are so time-consuming to work with.

Size of the Problem

The number of families on the register has remained at 80, 12 families having been added, but also 12 names deleted. I am sad to report that two families have broken up and the four children involved received into care. In one case the mother deserted the family and disappeared, and in the other she so badly neglected the children that they had to be taken into care for their own safety. Fifteen of the families are classified as severe problems having multiple problems requiring constant case work. Thirty-one families require less case work, and 32 are classified as "at risk", requiring supervision to help prevent them getting into difficulties.

Case Work

The saying "impossibilities are dealt with immediately, but miracles take a little longer" is appropriate for the case work undertaken. The "impossibilities" that the social workers have achieved are the tiding of a family over physical crises—mother seriously ill, father deserted, no food, fuel or bedding, in one case no furniture in the new house, and the most difficult of all—no roof over their heads. I cannot pay adequate tribute to the tireless devotion and long hours worked by the Field Workers helping families who have in most cases got into these difficulties "through their own silly fault". This brings me to the "miracles" referred to; the changing of feckless, self-centred immature parents into stable, caring people who are able to exercise some foresight for the problems of tomorrow. This takes time, it takes a special sort of caring and forgiving relationship, and it doesn't always happen. Eight of the families (10 per cent) are reported to have deteriorated during the year, without exception due to the personality defects of the parents. On the other hand, 24 families have improved during the year.

Problems Encountered

Thirty-two families were given notice to quit, but fortunately only two warrants for possession were actually executed. Two families still have serious accommodation problems, but ten have been rehoused, thanks to the sympathetic understanding of the Housing Committee and Housing Manager.

Twenty-seven of the families have only one parent present. The problems of unsupported mothers and their children are increasingly commanding our attention, and there is a need for some special housing accommodation to help the less stable (and usually more lonely). A special meeting was convened to discuss this matter during the year. Dr. Barnardo's Homes have pioneered the provision of accommodation for unmarried and unsupported mothers, and Miss Hodges, the Barnardo's Area Officer, gave the Committee the benefit of her experience of the working of their hostels. There is a lot to be said in favour of a voluntary body running such a hostel, in premises provided by the local Authority. The cost of purchase and adaptations of property in Eastbourne would be a crippling burden to voluntary

organisations, but they have more freedom (and time) to experiment with different ways of running it than have the paid officers of this Authority.

Eight of the families have had another baby during the year, and one termination of pregnancy was carried out. Six of these pregnancies are regarded as "mistakes", a figure of 7.5 per cent. However 26 of the families are now being helped by the domiciliary family planning scheme, and no pregnancies occurred among this group. I cannot over-emphasise the importance of this work in helping parents with limited resources to cope with their children.

A lesson learned during the year was the hazard of bringing together too many problem families within one housing estate. A number of older type three-bedroom houses became vacant in one area due to the Council's policy of rehousing tenants of under-occupied houses. A number of families with social problems were moved in to take their place. This in itself was excellent, for it meant that the houses were used for the families that needed them most. The mistake was to bring together too great a concentration of these families, whose tendency to let standards of hygiene and tidiness slip, to indulge in pursuits of doubtful profitability and legality, and to exchange conjugal rights, not only caused the righteous indignation of the neighbourhood, but also led into temptation other less stable inhabitants of the area. In Royal Sussex Crescent alone, a road of 119 houses, 12 families on the register of the Co-Ordinating Committee were brought together, and this 10 per cent concentration was sufficient to provoke petitions to the Town Hall, and headlines in the local newspaper. It is interesting to see that the children have been absorbed better than their parents, and with one disastrous exception which required rehousing in a more tolerant area, complaints about children's behaviour have not increased. The local schools, however, already filled by the housing development in Old Town, became seriously over-full as a result of this unpredicted movement of large families. Five mobile classrooms have been erected to accommodate the extra children. The schools will share with the parents and the social workers the task of helping these children grow into good citizens.

Special Measures

1. *Material Aid.* During the year £55 has been spent on seven families, a significant drop from last year's figure of £192. Grants are only made as part of an overall plan to rehabilitate the family, and without them a number of children might have had to be received into care.

2. *Family Planning.* The domiciliary family planning service now has 48 mothers on the roll, of whom 26 are on the Committee's register. This service is provided at the request of social workers, when there is a need for contraceptive advice, but the mother is unable or unwilling to attend the clinic at Avenue House. A grant of £250 was made to the local F.P.A. for this service by the Health Services Committee.

3. *Weekly Rent Collection.* This has been continued and expanded, and a total of 94 families have agreed arrangements for a weekly visit related to pay day.

4. *Teaching Home Helps.* Five families on the register were given general domestic help, and one family was given a teaching home help. Unfortunately the mother of the family deserted and the children had to be taken into care. The provision of a teaching help can be extremely useful, but the relationship between help and mother is always delicate, and teaching home helps have to be carefully selected.

5. *Rehousing.* Ten families have been rehoused by the Housing Department through the year. The provision of adequate accommodation is often the most important single step in rehabilitation, for it anchors a drifting family and gives it an incentive to build a home, thus providing the security the children need.

In conclusion I should like to thank all the members of the Co-ordinating Committee for their friendly co-operation in this joint venture. Mrs. S. M. James, the Committee Secretary, retires in 1969 and takes with her our thanks for her help with the clerical work and our best wishes. Mrs. S. M. Hook has handed over as clerk-typist to Mrs. J. Rudman whom I have to thank for much patient work in preparing agendas, minutes and lists of families in need of help.

W. J. WIGFIELD, M.A., M.B., Ch.B., D.P.H.

Chairman.

DEPARTMENT OF EDUCATION AND SCIENCE
MEDICAL INSPECTION AND TREATMENT

(Excluding Dental Inspection and Treatment. See Form 28M)

RETURN FOR THE YEAR ENDED 31ST DECEMBER, 1968

Local Education Authority: COUNTY BOROUGH OF EASTBOURNE

Number of pupils on registers of maintained primary, secondary, special and nursery schools in January, 1969.

(i) Form 7 Schools, 7,252; (ii) Form 7M, 101; (iii) Form 11 Schools, Nil. TOTAL .. 7,353

NOTES—1. Where selective medical examinations are being carried out enter in column below the number of pupils who have been "interviewed" or "discussed" at case conferences and found not to warrant a medical examination.

2. Pupils found at Periodic Inspection to require treatment for a defect should not be excluded from columns (6), (7) and (8) by reason of the fact that they were already under treatment for that defect.

3. Columns (6), (7) and (8) relate to individual pupils and not to defects. Consequently, the total in column (8) will not necessarily be the same as the sum of columns (6) and (7).

Part I

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

TABLE A—PERIODIC MEDICAL INSPECTIONS

Age Groups Inspected (By year of Birth)	No. of Pupils who have received a full medical examination	Physical Condition of Pupils Inspected		Pupils found to require treatment (excluding dental diseases and infestation with vermin)		
		SATISFACTORY	UNSATISFACTORY	For defective vision (excluding squint)	For any other condition recorded at Part II	Total individual pupils
		Number	Number			
(1)	(2)	(3)	(4)	(6)	(7)	(8)
1964 and later	—	—	—	—	—	—
1963	200	200	—	20	51	64
1962	510	510	—	41	113	143
1961	28	28	—	1	6	7
1960	9	9	—	1	1	2
1959	13	13	—	—	3	3
1958	15	15	—	—	3	3
1957	11	11	—	1	1	2
1956	10	10	—	2	1	3
1955	10	10	—	2	2	4
1954	419	418	1	79	61	127
1953 and earlier	141	141	—	22	20	35
TOTAL	1,366	1,365	1	169	262	393

Column (3) total as a percentage of Column (2) total: 99.93%

Column (4) total as a percentage of Column (2) total: 0.07%
to two places of decimals

TABLE B—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	267
Number of Re-inspections	1,697
	Total .. 1,964

TABLE C—INFESTATION WITH VERMIN

NOTES—All cases of infestation, however slight, should be included in Table C. 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 . .	10,485
(b) Total number of individual pupils found to be infested	29
(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 Periodic and Special Medical Inspections during the Year

NOTE—All defects, including defects of pupils at Nursery and Special Schools, noted at periodic and special 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).

Defect Code No.	Defect or Disease	PERIODIC INSPECTIONS								SPECIAL INSPECTIONS	
		Entrants		Leavers		Others		Total		(T) (11)	(O) (12)
		(T) (3)	(O) (4)	(T) (5)	(O) (6)	(T) (7)	(O) (8)	(T) (9)	(O) (10)		
(1)	(2)										
4	Skin	17	20	24	2	3	—	44	22	5	—
5	Eyes:										
	a. Vision	61	198	102	21	6	7	169	226	6	1
	b. Squint	14	5	4	—	—	—	18	5	—	3
	c. Other	1	—	—	—	1	—	2	—	—	15
6	Ears:										
	a. Hearing	15	171	—	2	1	8	16	181	10	—
	b. Otitis Media	—	2	1	2	—	—	1	4	—	4
	c. Other	5	7	—	—	1	—	6	7	2	10
7	Nose and Throat	23	58	3	5	—	1	26	64	5	8
8	Speech	33	32	1	1	—	—	34	33	—	—
9	Lymphatic Glands	7	17	—	—	—	—	7	17	—	1
10	Heart	9	8	2	3	—	—	11	11	—	3
11	Lungs	6	21	12	—	2	1	20	22	3	—
12	Developmental:										
	a. Hernia	1	5	—	—	—	—	1	5	—	1
	b. Other	—	14	2	2	—	3	2	19	—	—
13	Orthopaedic:										
	a. Posture	1	10	4	10	—	3	5	23	—	—
	b. Feet	46	38	9	1	6	3	61	42	17	2
	c. Other	6	5	3	—	—	—	9	5	2	2
14	Nervous System:										
	a. Epilepsy	1	2	2	—	—	—	3	2	3	1
	b. Other	2	32	1	—	—	1	3	33	—	—
15	Psychological:										
	a. Development	1	9	—	2	—	1	1	12	6	4
	b. Stability	4	28	—	3	—	—	4	31	26	17
16	Abdomen	2	5	1	—	—	—	3	5	16	—
17	Other	5	11	16	10	1	4	22	25	48	7

Part III

Treatment of Pupils attending Maintained 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

	<i>Number of cases known to have been dealt with</i>
External and other, excluding errors of refraction and squint	16
Errors of refraction (including squint)	455
TOTAL	471
Number of pupils for whom spectacles were prescribed	216

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

	<i>Number of cases known to have been dealt with</i>
Received operative treatment:	
(a) for diseases of the ear	2
(b) for adenoids and chronic tonsilitis	196
(c) for other nose and throat conditions	23
Received other forms of treatment	12
TOTAL	233
Total number of pupils still on the register of schools at 31st December, 1968, known to have been provided with hearing aids:	
(a) during the calendar year 1968 (see note below)	—
(b) in previous years	20

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

	<i>Number known to have been treated</i>
(a) Pupils treated at clinics or out-patients departments	30
(b) Pupils treated at school for postural defects ..	12
TOTAL ..	42

TABLE D—DISEASES OF THE SKIN

(excluding uncleanliness, for which see Table C of Part 1)

	<i>Number of pupils known to have been treated</i>
Ringworm—(a) Scalp	—
(b) Body	1
Scabies	—
Impetigo	27
Other skin diseases	269
TOTAL ..	297

TABLE E—CHILD GUIDANCE TREATMENT

	<i>Number known to have been treated</i>
Pupils treated at Child Guidance clinics ..	67

TABLE F—SPEECH THERAPY

	<i>Number known to have been treated</i>
Pupils treated by speech therapists	142

TABLE G—OTHER TREATMENT GIVEN

	<i>Number known to have been treated</i>
(a) Pupils with minor ailments	236
(b) Pupils who received convalescent treatment under School Health Service arrangements ..	—
(c) Pupils who received B.C.G. vaccination ..	407
(d) Other than (a), (b) and (c) above, please specify:	
Breathing exercises in school	29
Breathing exercises in clinic	2
Foot exercises in school	162
TOTAL (a)–(d)	836

SCREENING TESTS OF VISION AND HEARING

1. (a) Is the vision of entrants tested as a routine within their first year at school? Yes.
- (b) If not, at what age is the first routine test carried out? —
2. At what age(s) is vision testing repeated during a child's school life? Annually 6–16½ years.
3. (a) Is colour vision testing undertaken? Yes.
- (b) If so, at what age? 14 years.
- (c) Are both boys and girls tested? Boys.
4. (a) By whom is vision testing carried out? School Nurses.
- (b) By whom is colour vision testing carried out? School Medical Officers.
5. (a) Is routine audiometric testing of entrants carried out within their first year at school? Yes.
- (b) If not, at what age is the first routine audiometric test carried out? —
- (c) By whom is audiometric testing carried out? School Nurses.

INDEX

	<i>Page</i>
Aged, Provision for	51
Agencies for Nurses	85
Ambulance Service	35
Animals Slaughtered for Food	67
Ante-Natal Care	19
Baths, Swimming and Individual	62
B.C.G. Vaccination	42
Births	13
Blind Persons	54
Caravan Sites	77
Cancer	16
Care of Mothers and Young Children	19
Child Minders	85
Children Act, 1948	86
Child Welfare Clinics	22
Chiropody	44
Convalescence	38
Day Nursery	24
Deaf and Dumb	55
Deaths, Causes of	14
Dental Care	23
Diphtheria Immunisation	33
Factories Acts, Inspections	81
Defects	82
Outwork	83
Family Planning	40
Food Inspections	66
Handicapped Persons	54
Health Education	27
Health Visiting	26
Home Nursing	30
Home Help Service	45
Homes, Mother and Baby	22
,, Old People's	52
,, Nursing	85
,, Registration of	58
,, Voluntary	54
Hostel (Mental Health Service)	46
Housing, Action under Statutory Powers	74
Inspection of Dwelling Houses	74
Ice Cream	70
Immunisation, Diphtheria	33
Whooping Cough	34
Incontinence Pad Service	44
Infantile Mortality	20
Infectious Diseases, Notifications	59
Information, Summary of Local	18
Laundry Service	45
Maternal Mortality	20
Meat Inspection	67
Medical Examination	86
Mental Health Service	46

	<i>Page</i>
Meteorology	87
Midwifery Service	25
Midwives Act	86
Milk Supply	68
Mother and Baby Homes	22
Moveable Dwellings	77
Notifications, Births	17
Infectious Diseases	59
Nurseries and Child Minders Regulation Act	85
Nursery, Day	85
Nurses' Agencies	85
Nursing Equipment, Loan of	39
Nursing Homes	85
Old People's Organisations	58
Poliomyelitis Vaccination	34
Premature Infants, Care of	21
Prevention of Illness, Care and After Care	38
Rag, Flock and Other Filling Materials Act, 1951	77
Registrations, Blind Persons	54
Dairies and Milk Distributors	68
Disabled and Old Persons' Homes	58
Nurseries and Child Minders	85
Nursing Homes	85
Rodent Control	83
St. John Ambulance Brigade	35
Sampling, Food and Drugs	72
Ice Cream	70
Milk	69
Sewage Disposal	62
Shops Act	41
Sitter-in Service	41
Smallpox Vaccination	33
Still Births	18
Swimming Baths	62
Tetanus Vaccination	34
Training Centres	49
Tuberculosis, B.C.G. Vaccination	42
Register	41
Unmarried Mothers	22
Vaccination against Poliomyelitis	34
Smallpox	33
Tetanus	34
Venereal Diseases	60
Vital Statistics	13
Voluntary Organisations	40
Water	61
Welfare Foods	23
Welfare Services	51
Whooping Cough Immunisation	34

SCHOOL HEALTH SERVICE

INDEX

	<i>Page</i>
Arrangements for Treatment	98
Child Guidance	92
Chiropody	99
Clinics	95
Colleges of Education	109
Defects and Treatment	114
Dental Care	105
Difficult and Problem Families	106
Employment of Children	107
Foot Inspection	100
Handicapped Children	104
Immunisation and Vaccination	109
Infectious Diseases	108
Medical Inspections	97
Medical Inspection Returns	112
Personal Hygiene	96
Provision of Clothing	107
School Hygiene	96
School Meals and Milk	107
Special Inspections	97
Special Tuition	104
Statistics	96
Tuberculosis	108
Visual Defects	99
Welfare	109
Work of the School Nurses	98

