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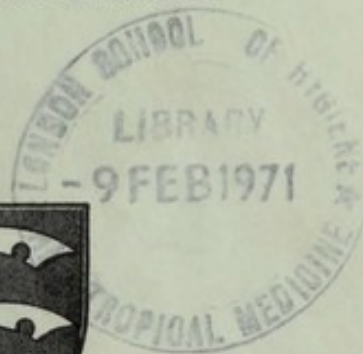


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COUNTY COUNCIL OF ESSEX



REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

for the Year

1969



COUNTY COUNCIL OF ESSEX
HEALTH DEPARTMENT

85-89 New London Road, Chelmsford CM2 OPS

Telephone: 53233

*With the Compliments
of the
County Medical Officer of Health
and
Principal School Medical Officer*

Date

My Ref.

Your Ref.

LXXX
1969

COUNTY COUNCIL OF ESSEX



REPORT

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

for the Year


1969

J. A. C. Franklin, M.B., B.S., D. P. H.

County Medical Officer of Health

85/89 New London Road, Chelmsford

Tel: Chelmsford 53233

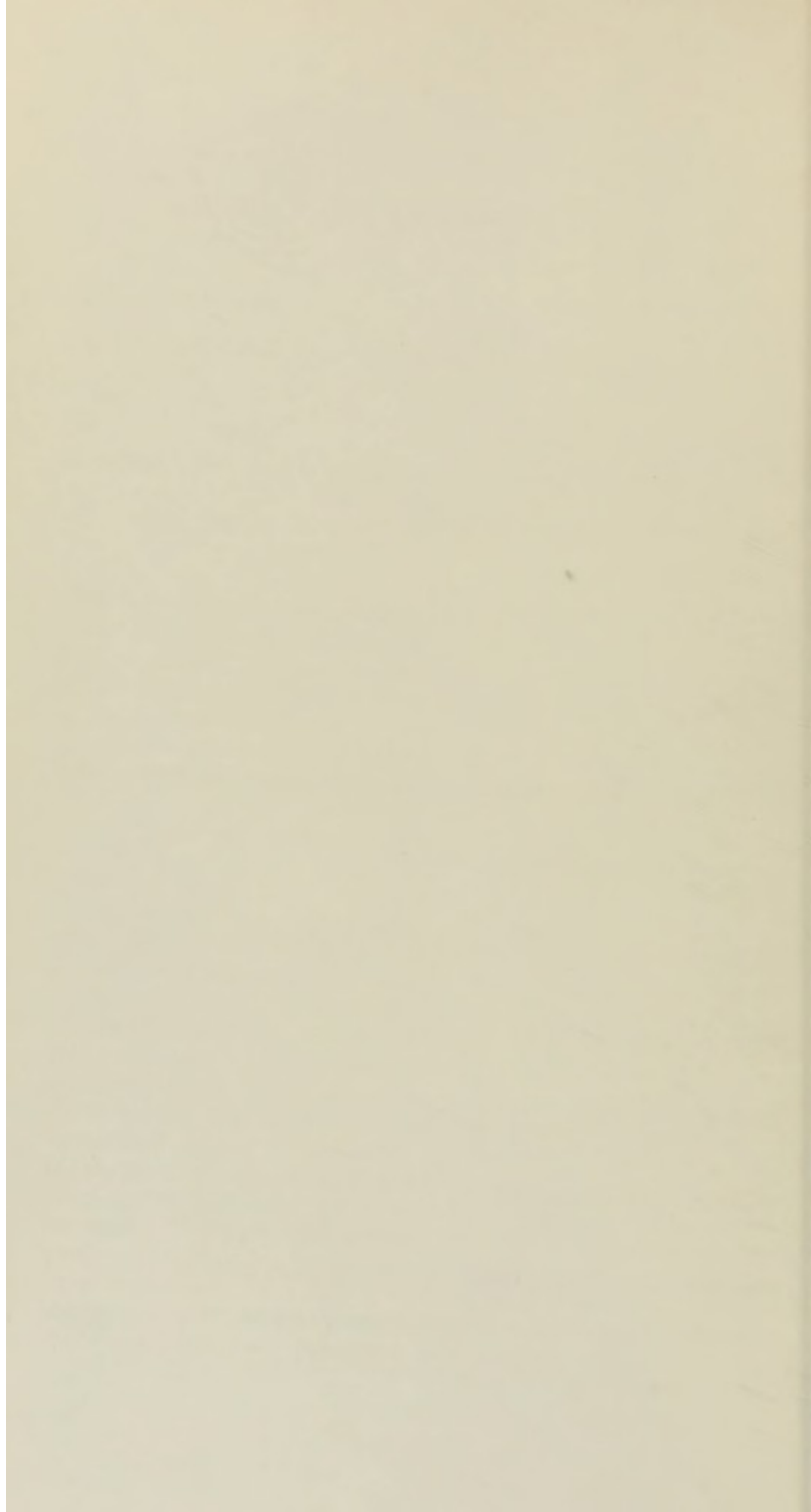


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P R E F A C E

85-89 New London Road
Chelmsford

Telephone: Chelmsford 53233

OCTOBER 1970

To the Chairman, Aldermen and Councillors of the County Council of Essex,

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present, as required by Department of Health and Social Security Circular 1/70, the Annual Report for 1969 which is the eightieth in respect of the administrative county and the fifth prepared by me.

It is with great regret that I record the death of Alderman O. L. Oxley, who had been a member of the County Council for 20 years and Chairman of the Health Committee since 1965, which occurred on 28th March 1969 following a road accident. In addition to his work on the County Council he was closely involved with developments in the hospital field, having a particular interest in mental health and the services provided for the mentally subnormal. He was a man devoted to his work for the health services and a most valued member of the County Council and Chairman of the Health Committee. His death is a great loss to the community, the County Council and the Health Department.

It is the custom in the preface to make some general comments about changes and developments and in this respect 1969 was a comparatively uneventful year. However, at the time of writing we know that in consequence of the Local Authority Social Services Act, 1970 a Social Services Department will be established by the County Council and that the Health Committee will cease to be responsible for the provision of day nurseries, the home help service, the mental health service and various associated services. By the time this report appears in print it is almost certain that all members of the staff will know whether or not they will be transferred to the new Department and are likely to know what their role will be. The future organisational structure of the "new" Health Department, particularly in regard to the central office, is under active consideration as a result of these changes. Further changes will of course depend on future legislation and because there has been a change of government it seems probable that there will be further thought in regard to the future of local government and the National Health Service and it seems unlikely there will be any major changes for some time.

To deal with items in the report itself - the birth rate and the total number of births were slightly less than in 1968 although the latter still exceeded 20,000.

The increasing trend for confinement to take place in hospitals is clearly defined and the percentage in each Health Area, except West Essex, was higher than in the previous year, the County average being well in excess of 75 per cent. In co-operation with the Health Department three hospitals were operating schemes whereby domiciliary midwives deliver babies in general practitioner units and further schemes were under active consideration. These schemes have so far proved very satisfactory and extremely popular but they do have the effect of causing difficulty in finding sufficient domiciliary work in some areas for the training of pupil midwives.

Reference is made in the report to proposals to recruit State Enrolled Nurses and District Auxiliaries in connection with the Home Nursing Service which will enable better use to be made of the skills of the staff and to provide a more efficient and economical service.

The Nursing and Midwifery Services have been under special pressure during the year particularly in regard to the increased training activities which are being undertaken and the additional number of registrations of nurseries and child minders, which creates a heavy burden for senior nursing staff.

Pollution of the environment is a subject currently receiving attention at many levels, local, national and international. For some years the department, in association with some district councils, has been co-operating with the Ministry of Technology in measuring air pollution and some particulars of this work are included in the report.

Special mention should be made of the expanding health education service as it is becoming increasingly recognised that the public in general should be encouraged to take positive steps in respect of their own wellbeing. It is gratifying to know that, certainly in the schools, the teaching staff and the parents of school children are taking a greater interest in this matter and it is hoped that it will be possible to maintain the high standards which have been set and to expand the service in the years to come.

The home help service is another service where although no significant changes took place arrangements were made for additional training schemes to be undertaken so that a better service could be provided for the community.

A comprehensive family planning service was brought into operation in July. The Family Planning Association provide this on behalf of the County Council, further details being shown in the body of the report.

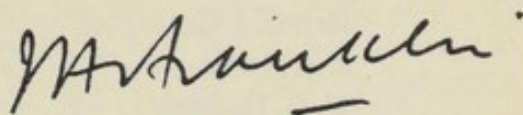
No basic changes took place in the ambulance service and it is pleasing to know that there has been a reduction in the average number of miles travelled per patient carried and that the service is now more economical than it used to be. Nevertheless, there are signs that some delays do occur particularly in returning patients to their homes after treatment and a close watch is being kept on this situation.

Further expansion and improvement took place in the services for the mentally disordered and at the end of the year a liaison committee was formed consisting of representatives of the County Council and the North East Metropolitan Regional Hospital Board together with other bodies involved to discuss and make recommendations with a view to improving the planning and co-ordination of services for which each is responsible.

In conclusion, it is with pleasure that I record my thanks to the members of the County Council, my colleague Chief Officers and the staffs of the other departments of the County Council with whom we come into contact for their support and co-operation during the past year. In particular, I wish to express my appreciation of the staff of my department for their hard work during the year, not least in the compilation of this report.

I am, Ladies and Gentlemen,

Your obedient Servant,

A handwritten signature in dark ink, appearing to read 'J. H. ...', with a horizontal line underneath.

County Medical Officer of Health

COUNTY COUNCIL OF ESSEX

HEALTH COMMITTEE

(as at 31st December 1969)

Chairman — Alderman G. C. Waterer, B.Sc.

Vice-Chairman — Councillor Mrs I. H. Nelson Parker

County Council Members —

Aldermen -

F. W. Aylmore

*Mrs. F. L. Coker, C.B.E.

*Brig. T. J. F. Collins, C.B.E.,
D.L.

Mrs M. R. Davey

*S. Woodfull Millard

W. R. Wright, M.Inst. S.M.

Councillors -

D. E. Affleck

Mrs. K. M. C. Bennett

G. R. Browne

J. L. M. Crofton

J. J. Davidson

R. G. Fairhead

D. J. Fisher

Mrs. L. I. Greenfield

P. J. Harty

W. G. Hodgins

J. F. Holmden

A. Jones, M.B.E., J.P.

Mrs. M. G. Mahoney

Mrs. J. C. Martin

H. G. Pembroke

F. R. Prosser

W. C. Redbond

Mrs. D. C. Reed

D. R. Savage

A. H. J. D. Siddons

Mrs E. M. Tuck

R. A. Wale

D. M. Warner

(2 vacancies)

Other Members —

Appointed by the County Council —

Mrs. D. M. Dixon

Mrs. J. L. Robinson

Nominated by other bodies —

Mr. H. E. Bates, M.M., J.P.

Mr. A. A. W. Bennett

Mrs. B. E. Double, O.B.E., J.P.

Mr. T. Dove

Dr. S. C. Emerick

Col. A. H. T. Hogge

Miss E. M. Leggatt

Mrs E. I. V. Morris

Brig. D. F. Panton, C.B.E.

Mrs. L. M. Scott

Mrs. D. M. M. Stieber

Mrs. E. C. Walker

*Ex-officio Member

STAFF OF THE HEALTH DEPARTMENT

(as at 31st December 1969)

1. CENTRAL OFFICE

County Medical Officer of Health:

J. A. C. Franklin, M.B., B.S., D.P.H.

Deputy County Medical Officer of Health:

R. D. Pearce, M.R.C.S., L.R.C.P., D.P.H.

Principal Medical Officer:

Elizabeth M. Sefton, M.R.C.S., L.R.C.P., D.C.H., D.P.H.

Medical Officers:

*Lilian Bates, M.D.(Paris), D.P.H.

*M. E. York-Moore, M.B., B.S., M.R.C.S.,
L.R.C.P., D(Obst.), R.C.O.G., D.P.M.

*B. Matheson, M.B., Ch.B., D.P.M.

Consultant Audiologist:

*A. N. Cammock, B.A., B.M., B.Ch., D.L.O.

(Commenced 1.8.69)

Chest Physicians:

† (Joint appointments with Regional Hospital Boards)

*J. T. Brown, M.B., Ch.B., D.P.H.

*R. C. Cohen, M.D., B.S., D.P.H.

*M.J. Greenberg, M.A., M.B., B.Chir., M.R.C.P., M.R.C.S.

*E. Rhys Jones, B.Sc., M.B., B.Ch., M.R.C.P.

*F. Kellerman, M.D., L.R.C.P., L.R.C.S.

*Vivien U. Lutwyche, M.D., M.R.C.P.

*E. G. Pyne, M.B., Ch.B., D.P.H.

*E. G. Sita-Lumsden, M.A., M.D., M.R.C.P.

*E. Woolf, M.R.C.S., L.R.C.P.

Chief Dental Officer:

J. C. Timmis, L.D.S., R.C.S.

Superintendent Nursing Officer:

Miss J. F. Carre, S.R.N., S.C.M., Q.N., H.V.Cert.

District Nurse Tutor:

P. Harvey, S.R.N., Q.N.

(Commenced 1.4.69)

*Part-time Officer

† Arrangements terminated 31st March 1969

County Home Help Organiser:

Mrs. C. A. Wilby, M.I.H.H.O.

County Health Inspector:

M. E. Rousell, M.A.P.H.I., M.R.S.H.

Assistant County Health Inspector:

W. J. Hodgkins, M.A.P.H.I., M.R.S.H.

Technical Assistant:

A. G. Chambers

Sampling Officer:

L. A. Rowlands

County Ambulance Officer:

R. A. Cupit

Assistant County Ambulance Officer:

J. R. Peacham

County Psychiatric Social Worker:

K. E. Jones

Supervising Mental Welfare Officer:

K. M. Skingley

Organiser of Training Centres:

Mrs. L. Secker

County Health Education Organiser:

C. E. Williams

Assistant County Health Education Organiser:

G. H. White

Dental Health Assistant:

*Mrs. S. Chopping
(Commenced 1.10.69)

Technical Assistants:

N. S. Palmer
C. E. Mansfield

Health Suite Nurses:

Mrs. R. M. Boswell, S.R.N.
Mrs. M. M. Brown, S.R.N.
Mrs. M. J. Townend, S.R.N.

*Part-time Officer

Statistician:
W. H. Leak, B.A., F.S.S.

Chief Administrative Officer:
E. W. Amos

Principal Administrative Officer:
D. C. Parker

Senior Administrative Officers:
D. P. Flatt, A.R.S.H.
R. W. Kirby, D.M.A.
C. E. Boden, D. M. A.

Administrative and Clerical Staff:
53 whole-time and 1 part-time

2. CENTRALLY ADMINISTERED SERVICES

Ambulance Service:

Training Officer	1
Area Superintendents	3
Control Supervisor	1
Controllers	5
Assistant Controllers	4
Control Operatives	9
Clerk Telephonists	7
Head Drivers	25
Driver Attendants	287
Area Clerks	3
Transport Officers	5

Mental Health Service:

Area Psychiatric Social Workers	3
Senior Mental Welfare Officers	4
Mental Welfare Officers	23
Trainee Mental Welfare Officers	10
Training Centre Supervisors/Managers	12
Training Centre Senior Assistant Supervisors/Instructors	7
Training Centre Assistant Supervisors/Instructors	68
Trainee Assistant Supervisors	3
Sheltered Workshop Manager	1
Sheltered Workshop Instructors	2
Hostel Wardens	5
Hostel Deputy Wardens	2
Hostel Matrons	3
Hostel Assistant Wardens	13

3. MEDICAL OFFICERS OF HEALTH OF AUTHORITIES WITH DELEGATED POWERS:

Colchester M.B.C.
Basildon U.D.C.

*John D. Kershaw, M.D., B.S., D.P.H.
*P. X. O'Dwyer, M.B., B.Ch., D.P.H.

4. AREA MEDICAL OFFICERS

North-East Essex
Mid-Essex

*John D. Kershaw, M.D., B.S., D.P.H.
*J. L. Miller Wood, V.R.D., M.R.C.S., L.R.C.P.
D.P.H.

South-East Essex

*D. A. Smyth, M.B., B.S., D.P.H., F.R.S.H.

West Essex

*J. A. Slattery, M.R.C.S., L.R.C.P., D.P.H.

Harlow

*I. Ash, M.D., D.P.H.

Thurrock

*T. D. Blott, B.Sc., M.B., B.S., D.P.H.

5. DELEGATED AND DECENTRALISED SERVICES:

	Establishment	No. employed (equivalent whole-time)
<i>Medical -</i>		
Medical Officers	39.12	35.62
<i>Dental -</i>		
Area Dental Officers	8.0	8.0
Dental Officers	40.0	27.55
Dental Auxiliaries	8.0	2.0
Dental Hygienists	2.0	-
Dental Surgery Assistants	48.0	39.6
<i>Nursing and Ancillary -</i>		
Non-Medical Supervisors of Midwives and Superintendent of Home Nurses	7.0	7.0
Midwives, Home Nurse/Midwives and Home Nurses	342.0	335.0
Superintendent Health Visitors	7.0	7.0
Health Visitors	215.0	204.1
Clinic Clerks	50.0	48.1

<i>Day Nurseries -</i>		
Matrons	6.0	6.0
Deputy Matrons	6.0	6.0
Wardens	6.0	6.0
Nurses and Assistants)	35.0	31.3
Students*)		
<i>Health Education -</i>		
Area Health Education Officers	4.0	1.0
<i>Chiropody-</i>		
Chiropodists	40.0	28.15
<i>Mental Health -</i>		
Social Workers	5.0	4.0
Training Centre Supervisors	2.0	2.0
Training Centre Assistant Supervisors and Instructors	17.0	16.0
<i>Home Help -</i>		
Organisers	26.0	22.5
Home Helps		760.0
Administrative and Clerical	169.5	156.6

*3 Students equivalent to 1 Nursery Nurse or Nursery Assistant.

SECTION 1 - STATISTICAL

As requested by the Department of Health and Social Security, certain vital statistics relating to mothers and infants are given below. The statistics for 1967 and 1968 are also given for comparative purposes:-

	1967	1968	1969
Live Births			
Number	20,012	20,246	20,169
Rate (per 1,000 population)	18.1	17.9	17.5
Percentage registered as illegitimate	5.3	5.5	4.9
Stillbirths			
Number	270	248	228
Rate (per 1,000 total births)	13.3	12.1	11.2
Total Births (live and still)	20,282	20,494	20,397
Infant Mortality			
Number of deaths under 1 year	337	295	271
Rate per 1,000 live births (all infants)	16.8	14.6	13.4
Rate per 1,000 live births (legitimate infants)	16.5	14.2	13.1
Rate per 1,000 live births (illegitimate infants)	22.5	20.7	19.3
Neonatal (first four weeks) mortality rate	11.8	9.9	9.6
Early neonatal (first week) mortality rate	10.1	8.6	7.9
Perinatal (still births and first week) mortality rate	23.3	20.6	19.0
Maternal mortality (including abortion)			
Number of deaths	3	2	5
Rate per 1,000 total births	0.15	0.10	0.25

Most of these statistics are commented upon in detail elsewhere in this report. In Table I on page 82 will be found the population and principal vital statistics for Health Areas and County Districts including the two Districts with delegated powers. Details of deaths by cause are given for different age groups in Table II and for County Districts in Table III. Table IV gives the age distribution of deaths in each County District and Health Area. As mentioned in previous reports, the vital statistics given for 1964 and earlier years are not exactly comparable with those for later years.

The remainder of this section is devoted largely to a discussion of the figures in Tables I-IV.

Population

The Registrar General's estimated mid-1969 population of the Administrative County was 1,149,980 compared with 1,129,870 in 1968 and 1,102,850 in 1967, an increase in the last year of 20,110 compared with

27,020, 25,170 and 22,830 in the three previous twelve month periods. The natural increase of population in 1969 was 8,366 compared with 8,696 in 1968 and 9,290 in 1967 and net migration may be estimated at about 11,750 compared with 18,300 and 15,900 in the two previous periods. The smaller increase in population is thus due partly to a smaller natural increase and partly to a smaller movement of people into the county. Except in Colchester where the movement of military personnel confuses the picture and Thurrock Health Area where there is little immigration, net immigration was lower in 1969 than in 1968 and 1967 for each administrative subdivision of the County.

Births

The number of live births during 1969 was 20,169 compared with 20,246, 20,012, and 20,096 in the three previous years. There has been virtually no change in the number of births since 1964 when there were 20,028 but the birth rate has fallen steadily from 19.4 in that year to 17.5 in 1969. However when allowance is made for the different sex and age distribution of the local population compared with England and Wales, the birth rate in 1969 is found to be 4% above that for the country as a whole compared with 3% in 1968 and 2% in the three previous years. It seems therefore that the fall in the birth rate in Essex has been somewhat smaller than in other parts of the country.

The birth rate fell in most parts of the County but increased slightly in the Mid Essex (particularly at Witham, Chelmsford and in Braintree Rural District) Harlow and Thurrock Health Areas. More than half the County Districts had an adjusted birth rate more than 10 per cent higher than the national rate. The aggregate of rural areas had a rate 17 per cent higher and among urban districts, Canvey Island, Witham and Braintree and Bocking had rates more than 30 per cent higher.

The number of births registered as *illegitimate* was 998 (16 of which were stillborn). This was 4.9 per cent of the total number of births and is the lowest figure since the same figure was recorded in 1964; in 1968 the percentage registered as illegitimate was 5.5 per cent. The Essex rate remained well below the national rate of 8.4 per cent.

There were 228 *stillbirths* during the year giving a stillbirth rate of 11.2 per 1,000 total births compared with 12.1 in 1968, 13.3 in 1967 and 12.4 in 1966. The 1969 rate is the lowest recorded in the county.

The number of *premature* births notified was 1,249 (131 of which were stillborn) compared with 1,268 in 1968 and 1,275 in 1967. The percentage of premature to total births was 6.1 compared with 6.2 in 1968 and 1967.

Perinatal Mortality

The perinatal mortality rate was 19.0. The figures for the last 8 years are given below, from which it will be seen that the rate was again the lowest recorded in the present Administrative County.

1962	1963	1964	1965	1966	1967	1968	1969
26.6	25.2	25.7	22.9	21.9	23.3	20.6	19.0

Only the North-East Essex, South-East Essex and Thurrock Health Areas had rates of over 20 and none had a rate above 23.

The perinatal mortality rates of infants of different birth weights in the last five years were as follows:-

	2lb.3oz. or less	2lb.4oz.- 3lb.4oz.	3lb.5oz.- 4lb.6oz.	4lb.7oz.- 4lb.15oz.	5lb. 5lb.8oz.	Over 5lb.8oz.	All Weights.
1965	937	670	265	136	66	11	23
1966	910	702	284	151	74	9	22
1967	880	628	315	149	71	9	23
1968	846	645	287	108	59	9	21
1969	782	639	264	69	50	9	19

The favourable perinatal mortality rate in 1969 was due largely to the improved survival rate of the lowest weight babies and of those between 4 lb. 7 oz. and 4 lb. 11 oz.

Infant Mortality

There were 271 deaths of infants under one year of age giving an infant mortality rate of 13.4 per 1,000 live births compared with 14.6 in 1968, 16.8 in 1967 and 15.1 in 1966. In the following table, infant mortality is divided into mortality in the first week of life and later in the first year.

	1962	1963	1964	1965	1966	1967	1968	1969
Early neonatal (first week) mortality rate	10.8	10.5	10.1	9.9	9.6	10.1	8.6	7.9
Infant mortality rate after the first week	6.0	6.1	6.3	7.2	5.5	6.7	6.0	5.5
Total infant mortality rate	16.8	16.6	16.4	17.1	15.1	16.8	14.6	13.4

Mortality fell both during and after the first week. The early neonatal rate was very favourable and the rate after the first week equalled the lowest rate recorded (in 1966).

Mortality of Children

The following table sets out the number of deaths of children between 1 and 5 and between 5 and 15 years in the last seven years.

Age	1963	1964	1965	1966	1967	1968	1969
1 - 4	59	60	68	55	52	54	64
5 - 14	56	61	57	57	56	59	57

The death rate of children between 1 and 5 was 0.72 per 1,000 children compared with 0.61 in 1968 and for children between 5 and 15 was 0.31 compared with 0.33 in 1968.

Deaths from all causes

The number of deaths registered during the year (after adjustment for inward and outward transfers) was 11,803 giving a crude death rate of 10.3 compared with 10.2 in 1968, 9.7 in 1967 and 9.9 in 1966. When allowance is made for the different sex and age distribution of the local population compared with England and Wales, the death rate in Essex is found to be 13 per cent below that for the country as a whole compared with 13 per cent in 1968 and 14 per cent in 1967 and 1966.

The number of deaths in the last five years is given by age and sex at the foot of Table IV. This shows that the increase in deaths since 1968 was confined to males and mostly occurred between the ages of 55 and 75. Women between 55 and 65 also suffered an increase in deaths. Although there was no increase in deaths over 75 years of age, the number of deaths in elderly men and women was considerably above the level of 1965-67. The number of deaths increased in each Health Area and in the Urban District of Basildon. Deaths of males between 55 to 65 also increased generally but most of the increase in older men occurred in Mid-Essex and South-East Essex.

Tuberculosis Deaths

Deaths from tuberculosis numbered 25 compared with 26 in 1968 and 36 in 1967. Tuberculosis of the respiratory system was responsible for 17 deaths compared with 18 in 1968. The age distribution of tuberculosis deaths in the last seven years is as follows:-

Year	MALES						FEMALES					
	0-	25-	45-	65-	75-	Total	0-	25-	45-	65-	75-	Total
1963	-	-	14	9	2	25	-	1	2	-	4	7
1964	-	2	9	7	5	23	1	-	3	-	-	4
1965	1	2	6	4	5	18	-	3	3	6	2	14
1966	-	3	5	7	3	18	-	1	5	1	4	11
1967	-	1	9	7	5	22	1	1	4	3	5	14
1968	-	-	8	5	6	19	-	-	2	3	2	7
1969	1	-	3	8	6	18	-	-	1	4	2	7

Cancer Deaths

The number of deaths from cancer of the more important sites, including some not previously given in the report, in the last five years is set out below:-

	Males					Females				
	1965	1966	1967	1968	1969	1965	1966	1967	1968	1969
Buccal cavity and pharynx	20	12	18	17	18	13	7	8	9	10
Oesophagus	25	24	41	38	19	23	20	19	19	20
Stomach	138	162	131	132	159	90	82	94	115	110
Intestines	152	122	121	148	162	158	167	195	192	171
Larynx	17	9	12	8	11	4	3	-	3	2
Lung and Bronchus	417	442	490	465	515	75	80	97	114	104
Breast	2	4	2	3	2	190	231	237	232	243
Uterus	-	-	-	-	-	67	71	61	75	72
Prostate	82	98	82	99	99	-	-	-	-	-
Leukaemia	34	38	36	40	51	22	17	26	24	32
Other sites	281	313	268	287	313	277	268	308	300	330
All sites	1168	1224	1201	1237	1349	919	946	1045	1083	1094

The total number of deaths from cancer was 2,443 giving a cancer death rate of 2.12 per 1,000 population compared with 2.05, 2.04 and 2.01 in the past three years. The increased mortality was confined to males, nearly half the increase being from cancer of the lung and bronchus and the remainder from a number of different sites. There was no substantial increase among females for any site. The age distribution of cancer deaths in the last seven years is as follows:-

YEAR	MALES						FEMALES					
	0-	25-	45-	55-	65-	75-	0-	25-	45-	55-	65-	75-
1963	20	48	118	272	344	288	19	61	90	192	256	297
1964	22	53	110	279	342	291	13	77	116	189	250	287
1965	26	39	135	287	368	313	12	68	101	198	243	297
1966	26	51	132	294	419	302	14	54	118	191	265	304
1967	18	50	119	302	421	291	15	56	136	207	299	332
1968	18	47	115	303	429	325	10	40	117	235	323	358
1969	20	49	119	363	466	332	11	72	111	252	306	342

There was a sharp increase in cancer deaths among men between 55 and 65 and smaller increases among women of the same age and men between 65 and 75.

Deaths from Diseases of the Circulatory System

The following table shows the number of deaths from heart disease, cerebro-vascular disease and other circulatory diseases for the last four years.

	Males				Females			
	1966	1967	1968	1969	1966	1967	1968	1969
Heart disease	1,801	1,754	1,980	1,939	1,542	1,562	1,701	1,701
Cerebro-vascular disease	605	636	636	715	888	994	998	1,029
Other circulatory disease	208	199	199	229	245	252	220	265
Total	2,614	2,589	2,815	2,883	2,675	2,808	2,919	2,995

Total deaths in this group, which is responsible each year for about half the overall mortality, numbered 5,888 giving a death rate per 1,000 population of 5.12 compared with 5.07 in 1968, 4.92 in 1967 and 4.91 in 1966. After the sharp rise in 1968, there was no further increase in mortality from heart disease but both cerebro-vascular and other types of circulatory disease showed increased mortality. The age distribution of deaths from this group of diseases in the last seven years is given below:-

YEAR	Males					Females				
	0-	45-	55-	65-	75-	0-	45-	55-	65-	75-
1963	60	163	418	769	1,179	29	54	242	680	1,749
1964	61	171	466	734	1,084	35	71	191	646	1,711
1965	79	157	443	802	1,141	36	60	203	633	1,764
1966	54	170	481	790	1,119	25	64	195	601	1,790
1967	66	187	425	804	1,107	31	74	229	636	1,838
1968	65	181	492	854	1,223	30	64	202	646	1,977
1969	68	190	516	892	1,217	35	74	236	642	2,018

Most age groups showed some increased mortality but perhaps the most important was the increase for men and women between 55 and 65, which is associated with an increase in deaths from ischaemic heart disease.

Deaths from Diseases of the Respiratory System

There were 31 deaths from asthma in 1969 compared with 30 in 1968. Details of deaths from other respiratory diseases in the last eight years are set out below:

Cause	1962	1963	1964	1965	1966	1967	1968	1969
Influenza	36	34	15	52	43	11	199	125
Pneumonia	694	832	616	772	735	727	919	906
Bronchitis	485	539	477	464	539	496	505	540
Other respiratory diseases	84	99	91	92	100	75	141	112
Total	1299	1504	1199	1380	1417	1309	1764	1683

The number of deaths from influenza although lower than in 1968 was considerably above average and twenty six persons under the age of 65 died from influenza compared with 15 in 1968. Otherwise, there was a decrease in deaths from pneumonia and other respiratory diseases and an increase in deaths from bronchitis. The age distribution of deaths from pneumonia and bronchitis for the last seven years is given below:-

Cause	YEAR	Males					Females				
		0-	45-	65-	75-	Total	0-	45-	65-	75-	Total
Pneu- monia	1963	37	49	87	255	428	19	24	74	287	404
	1964	37	38	61	157	293	20	18	50	235	323
	1965	43	33	72	218	366	33	22	64	287	406
	1966	29	26	60	184	299	16	22	72	326	436
	1967	46	22	50	206	324	29	18	64	292	403
	1968	32	40	75	259	406	27	21	71	394	513
	1969	32	45	88	283	448	19	29	62	348	458
Bron- chitis	1963	7	67	141	160	375	5	16	39	104	164
	1964	11	69	122	155	357	8	14	32	66	120
	1965	11	55	131	149	346	5	20	28	65	118
	1966	14	87	148	138	387	6	13	50	83	152
	1967	7	80	138	153	378	8	14	38	58	118
	1968	1	65	184	158	408	3	16	27	51	97
	1969	2	82	166	171	421	4	20	40	55	119

The number of male deaths from both pneumonia and bronchitis increased to the highest figure for many years. There was a decrease in female deaths from pneumonia and the figure for bronchitis was average. The number of deaths of children under one year from pneumonia was 30 giving an infant mortality rate from the disease of 1.5 compared with 1.5, 2.6, 1.4 and 2.3 in the last four years.

Maternal Deaths

There were five maternal mortality deaths in 1969, none of which was due to abortion, giving a maternal mortality rate of 0.25 compared with 0.10 in 1968, 0.15 in 1967 and 0.20 in 1966. The national rate was 0.19.

Accidental Deaths and Suicide

The number of deaths from accidents and suicide in the last five years is as follows:-

	Males					Females				
	1965	1966	1967	1968	1969	1965	1966	1967	1968	1969
Motor vehicle										
accidents	103	115	101	102	105	38	32	36	34	40
Other accidents	68	97	85	86	95	90	102	72	97	120
Suicide	48	45	58	56	38	50	34	43	35	32

The number of fatal motor vehicle accidents and other types of accident increased while the number of suicides decreased. Deaths from motor vehicle accidents were at an above average level in the 25 - 35 age group while most of the increase in female deaths from other accidents was of those over 75; in 1969 seventy per cent of such deaths were in this age group.

Morbidity

The number of new claims for sickness benefit received in the 52 weeks ended 30th December 1968, at local offices of the Department of Health and Social Security in the Administrative County was 192,553. The number of claims and the number per 1,000 population at the same offices in each of the last five years were as follows:-

	1965	1966	1967	1968	1969
Number of claims	145,140	154,124	154,739	176,763	192,553
Claims per 1,000 population	138	143	140	156	167

The following table gives the average number of claims per week in each quarter of the last seven years:-

Year	January-March	April-June	July - September	October-December
1963	4,427	2,216	1,853	2,634
1964	3,450	2,325	1,909	2,760
1965	3,653	2,654	2,083	2,837
1966	4,249	2,686	2,031	3,003
1967	3,386	2,580	2,360	3,634
1968	5,336	2,734	2,310	3,417
1969	4,965	2,845	2,527	4,637

The number of new claims for sickness benefit was above average each quarter but especially in the December quarter due to the start of the influenza outbreak of December 1969 and January 1970 which caused much absence from work.

SECTION II – GENERAL

STAFF

Combined Medical Service

The post of Deputy Medical Officer of Health to the Councils of the Urban Districts of Epping and Harlow and the Rural District of Epping and Ongar and Medical Officer in the Harlow Health Area was filled by the appointment of Dr. G. E. Thomas, formerly a whole-time Medical Officer in the Harlow Health Area.

On 23rd September 1969 Dr. Elizabeth J. Vaughan, who had been a Medical Officer in the West Essex Health Area, was appointed Medical Officer of Health to the Braintree and Bocking and Witham Urban District Councils and the Braintree and Dunmow Rural Districts Councils and Medical Officer in the Mid-Essex Health Area. She succeeded Dr. C. R. C. Rainsford, who retired on 22nd September.

Medical Staff

With effect from 1st April 1969 the establishment of medical staff was varied by the creation of seven posts of Senior Medical Officer, one whole-time Medical Officer on the establishment of each Health Area / Delegatee Authority being replaced by a post of Senior Medical Officer - North-East Essex Health Area and Colchester Delegatee Authority being regarded as one for the purpose of this decision.

One member of the medical staff was seconded on a full-time course of study for the Diploma in Public Health in accordance with the arrangements mentioned in previous reports.

Other Staff

With a view to determining whether post-entry training facilities should be provided to assist members of the Council's dental staff to obtain the Diploma in Dental Public Health, Mr. J. C. Timmis, Chief Dental Officer, was seconded to attend a course of study arranged by the Dental Schools of the University of London.

During the year two training courses were held under the Council's scheme for the training of district nurses and all students, a total of 22, were successful at the examinations for the National Certificate in District Nursing.

Thirteen candidates who had been sponsored by the County Council for a year's course of health visitor training which commenced in September 1968 were successful in obtaining the Health Visitors Certificate of the Council for the Training of Health Visitors.

Eight posts of dental auxiliary, one for each Health Area/Delegatee Authority, were created on 1st April following the introduction of the Ancillary Dental Workers Regulations, 1968, which established this class of ancillary dental worker on a permanent basis.

Transport for Staff

At the end of the year 806 officers, mainly health visitors, midwives, home nurses and mental health social workers, whose duties necessitate a considerable amount of travelling, were using motor transport as shown below:-

Vehicles owned by the County Council	153
Privately-owned vehicles	653

Twenty-one members of the department's staff were granted loans under the Council's Assisted Car Purchase Scheme to assist them in purchasing their own cars for use on County business.

Refresher and Other Study Courses

Details are set out in Table X of staff who attended refresher and other courses of study during the year.

NATIONAL HEALTH SERVICE JOINT ADVISORY COMMITTEE

Two meetings of the Committee were held during the year when discussions took place on items affecting more than one branch of the National Health Service.

LABORATORY SERVICES

Local authorities within the County can avail themselves of the Public Health Laboratories situated at Chelmsford, Southend-on-Sea, Cambridge and Ipswich, for the bacteriological examination of water, milk and cream, foodstuffs, food containers, food utensils and equipment etc. Samples submitted by the County Council and other authorities were as follows:-

Milk	3,617
Milk containers (bottles, churns, etc.)	896
Milk tankers and dairy plant (swabbing)	166
Ice cream and lollies	1,253
Water	1,287
Shellfish	131
Other Food	1,852
Urine and faeces	154
Miscellaneous	168

Samples for chemical analysis are forwarded to the Counties Public Health Laboratories in London.

WATER SUPPLIES

The growing need to import water into Essex is reflective of the County's growth in population and the limitation of natural resources.

Stage I of the Ely-Ouse scheme is proceeding according to plan. It is being undertaken by the Essex River Authority and will enable surplus water to be transferred from the Ely-Ouse into the head waters of the Stour and the Blackwater. Stage I which is expected to be completed by 1971 involves considerable works estimated to cost £11 million and will result in the combined yield of the Abberton and Hanningfield reservoirs being increased by 24 m.g.d.

Water will thus be made available in the first instance to the South Essex Waterworks Company and the Hanningfield Joint Committee. The South Essex and Southend Water Companies are actively engaged in works costing a further £10 million which it is necessary for them to undertake to utilise this water. The South Essex Waterworks Company commenced additional treatment works at Layer-de-la-Haye and the triplication of the Stour trunk main while the Southend Waterworks Company were well advanced with the construction of new and enlarged Langford treatment works of 12 m.g.d. capacity. The extension of the Hanningfield Treatment plant to enable the additional water to be processed is under construction by the two companies jointly.

The Essex River and South Essex Water Bill received the Royal Assent in July and as a result the Essex River Authority were able to commence construction of the Cattawade barrage across the Stour. This scheme will make further supplies available to the South Essex Waterworks Company when that undertaking, for their part, have completed works including the necessary intake, pumping station and pipeline for the delivery of the water to their Company's Ardleigh Reservoir.

It is estimated that water supplied by Stage I of the Ely-Ouse scheme and the Cattawade scheme will suffice until the late 1970's or early 1980's. Thereafter much will depend upon the results of a pilot scheme, to investigate the optimum development of groundwater resources of the Great Ouse Basin which is being carried out by the Great Ouse River Authority.

The Lee Valley Water Company are involved in a costly scheme to import water from the Grafham Reservoir, near Huntingdon constructed by the Great Ouse Water Authority on which the Company is represented. In December 1969 the construction of the major capital works, which include 2' 0" and 3' 0" diameter pipeline, several reservoirs and pumping stations, reached an advanced stage. Ouse water came into supply in August 1969, but Essex will not materially benefit until about 1971 when a branch main from Bulls Green will feed into the existing trunk main supplying Harlow and from

there to most the Company's area in West Essex. Not only is this Company looking to the Great Ouse for additional supplies, but like the South Essex Waterworks Company is having recourse to the Thames. Regarding the latter the Company is participating jointly with two other water undertakings in a scheme which will result in up to 50 m.g.d. being abstracted progressively from the river of which the Company's share will be 10 m.g.d. The scheme is the subject of the Three Valleys Water Order which gave rise to two Public Enquiries in 1969.

Increasing demands in the Borough of Saffron Walden and the Rural Districts of Saffron Walden and Dunmow have necessitated a start being made on the scheme to develop a groundwater source at Uttlesford Bridge which will come into operation in 1971.

The Tendring Hundred Waterworks Company are taking water from two boreholes in East Suffolk and a third will be available to meet any reasonable demands in 1970. The Ardleigh reservoir scheme is one in which the Company and the Colchester Water Board are joint participants. The reservoir, which will hold 520 million gallons, is expected to be completed in 1970 and to be in operation in time to assist in meeting the 1971 summer peak with ample water available for the forecasted development of the Company's area up to 1981.

On 1st April 1969 the supply of Thames Water to the South Essex Waterworks Company via the Chigwell scheme was increased to 9 m.g.d.

While large schemes involving considerable activity and cost are in progress, small schemes still play an important part. The latter include the Lee Valley Water Company's 4 m.g. service reservoir under construction at Sibleys and a 6.8 m.g. service reservoir at Rye Hill designed to improve supplies in the Dunmow and Harlow areas respectively, and the South Essex Water Company's Roman River Scheme which came into operation on the 4th December. The last mentioned scheme enables 1,100 m.g. per annum surplus water from that river to be used to top up the Abberton reservoir.

The early 70's will doubtless see the end of the small water undertaking. In the 1920's there were no less than 28 water undertakings serving parts of the County although considerable areas of mid and north Essex were devoid of main supplies. Gradually in recent years the number has decreased in accordance with the Government's policy of regrouping. At the beginning of 1969 the number was 16, but on 1st April four undertakings in the Colchester area, those of the Braintree and Bocking and Halstead Urban District Councils and the Braintree and Halstead Rural District Councils, were taken over by the Colchester Water Board, thus reducing the number to 12. Following the news that the Metropolitan Water Board were not going to take any further action in regard to their proposals to take over the several water undertakings in South Essex, the South Essex Waterworks Company, the

Southend Waterworks Company and the remaining undertakings concerned, excepting Chelmsford Corporation, decided to proceed with their own amalgamation proposals as contained in their Order drafted in 1966, and to this end a revised Order was deposited with the Ministry. The Chelmsford Borough Council passed the necessary resolution, but were too late to be included in the Order, and it will need a further Order to accomplish their desired inclusion.

Throughout the year the undertakings concerned maintained their supplies at the usual high standard and although the summer months, particularly September, were drier than usual, reservoir levels were kept up and there was no shortage of supplies.

The population and, consequently, the demand for water, continues to grow, despite efforts to restrict development to the County Review Development Plan made in 1964 which forecasts a population of 1,378,600 in 1981 although it is extremely likely this will need to be modified.

When the Ely-Ouse scheme is in full operation other large schemes must follow in due course. The possibilities include the long mooted Wash Barrage, the subject of a desk study being undertaken by the Water Resources Board, the report on which was nearing completion by the end of the year and de-salinisation of sea water which may yet provide the water shortage solution in the long term.

Fluoridation of Water Supplies

During the year further consideration was given to the question of making arrangements as a protection against dental decay for the addition of fluoride to the public water supplies which are deficient in it naturally.

Apart from the financial aspects, it is well known that there are very difficult practical problems because some of the statutory water undertakers in the County are responsible for providing water in the areas of other local health authorities.

However, two areas of supply, one in north-east Essex and one in the north west corner, are likely to be practical propositions and the question of introducing schemes in these two areas was under active consideration at the end of the year.

RURAL WATER SUPPLIES AND SEWERAGE

Approved schemes of water supply and sewerage attract grant from the County Council equivalent to that made by the Ministry of Housing and Local Government. The total of such grants made to County Districts Councils for the financial year ended 31st March 1969 amounted to £149,177.

During the year the following schemes were submitted for the County Council's observations for use by the District Councils in making application to the Ministry:-

District	Scheme	Estimated Cost £
Water Supplies		
Brentwood U.D.C.	Water main, Kelvedon Hatch	2,240
Braintree R.D.C.	Cornish Hall End and Petches Bridge/Great Bardfield	19,850
Halstead R.D.C.	Extension - Sudbury Road, Little Maplestead	1,896
Tendring R.D.C.	Extension to water main, Bromley Road	3,865
Sewerage and Sewage Disposal		
Saffron Walden B.C.	Sewards End/Little Walden	104,840
Rayleigh U.D.C.	Rawreth (Church Road area) (revised)	10,060
Braintree R.D.C.	Coggeshall & Kelvedon S. & S.D. Boreham End, Hatfield Peverel	388,495 6,439
Chelmsford R.D.C.	North Springfield Foul Sewer East Hanningfield Sewerage Stock, Writtle & Highwood	19,208 99,350 279,540
Halstead R.D.C.	Bulmer S. & S. D. (scheme not likely to commence within next 2 years)	57,800
Lexden & Winstree R.D.C.	Langham & Boxted Sewer extensions Maldon Road, Tiptree	323,986 3,950
Maldon R.D.C.	Stone, St. Lawrence S. & S. D.	143,000
Saffron Walden R.D.C.	Widdington S. & S. D. Hadstock S. & S. D.	65,000 45,000

In certain circumstances, under the Rural Water Supplies and Sewerage Acts, 1944-1965, schemes in urban areas are considered for grant, accounting for the inclusion above of the Brentwood Urban District Council's Kelvedon Hatch Water Supply Scheme, the Saffron Walden Borough Council's Swards End and Little Walden Sewerage Schemes, and the Rawreth (Church Road) Scheme in the Rayleigh Urban District.

Such has been the progress made in the provision of water mains over the years that water schemes generally concern extensions to serve more isolated dwellings and new development.

The year saw sewerage works in progress in all Rural Districts; the completion of the Dunmow Rural Council's Lower Chelmer Valley Sewerage Scheme, three schemes by the Maldon Rural District Council and two by the Lexden and Winstree Rural District Council being worthy of note.

Eight of the 10 rural authorities have schemes anticipated to commence in 1970, the exceptions being Dunmow and Maldon. With a record of excellent progress in the provision of sewerage schemes it is not surprising that, apart from the provision of new treatment works at Hatfield Heath and Takeley, the former has no schemes in prospect at the present time. Schemes anticipated to commence in 1970 include Phase I of Tendring Rural District Council's long awaited Northern Area Scheme serving the parishes of Manningtree, Mistley, Lawford, Ardleigh and Bradfield, six schemes by the Epping and Ongar Rural District Council and four by the Saffron Walden Rural District Council.

The Lexden and Winstree Rural District Council hope to commence work on at least five sewerage schemes in 1971, while the Braintree Rural District Council have four schemes including the Coggeshall and Kelvedon sewerage and sewage disposal scheme phased for that year. Although the Epping and Ongar Rural District Council has no detailed programme after the year 1970/71 it has a formidable list of small schemes including sewer and sewage works extensions in prospect.

A number of schemes were with the Ministry for approval. Some have been deferred at the Ministry's request, but at least two of these are being re-submitted in 1970 in the hope that with an easing of the financial situation the Minister's approval will be forthcoming.

Restrictions on Development due to Sewerage difficulties

In the following areas all planning permissions require the concurrence of the County Planning Committee:-

Areas	District/Parish
North-East	Alresford
	Ardleigh
	Bradfield
	Elmstead
	Great Bentley
	Lawford
	Little Clacton
	Manningtree
	Mistley
	Parkeston
	Thorpe-le-Soken
	Wivenhoe
West	Clavering
	Elsenham
	Henham
	Widdington
Mid	Coggeshall
	Great and Little Braxted
	Great Totham
	Kelvedon
	North Fambridge
	Ramsden Heath
	St. Lawrence
	Stone
	Tollesbury
Thameside	Wickham Bishops
	Rayleigh Urban District
	(development drainage via Watery Lane Pumping Station)
	Rochford Rural District
	(on part drainage to Great Stambridge Works)

At Little Clacton, Thorpe-le-Soken and Wivenhoe in the north-east area of the County large scale development also requires the concurrence of the County Planning Committee.

MILK AND DAIRIES

Milk & Dairies Regulations and the Milk (Special Designation) Regulations 1963, as amended

At the end of the year, licences were in force as follows:-

Dealers (Pre-packed)	570
Dealers (Pasteurised)	5
Dealers (Sterilised)	2
Dealers (Untreated)	16

593

Processing Dairies

A total of 204 pasteurised and 79 sterilised samples were obtained from six dairies, of which two pasteurised samples failed the Methylene Blue test.

Four of the dairies employ their own laboratory staff, who not only provide additional public health safeguards but also deal with quality control.

Swabbing of dairy plants and bulk tankers continued; 166 examinations were made. Of these, 28 were not entirely satisfactory.

166 washed bottles were taken for examination as a check on the bottle washing machines. 160 of these were satisfactory and the remainder were fairly satisfactory.

280 churns were examined for bacterial cleanliness, out of which 46 were classified as unsatisfactory or only fairly satisfactory.

SAMPLING IN THE COURSE OF DISTRIBUTION

No. of Samples	Grade	Appropriate Test	Passed	Failed	Void
1456 (1528)	Pasteurised	Methylene Blue	1309 (1393)	85 (71)	62 (64)
		Phosphatase	1454 (1526)	2 (2)	- (-)
117 (91)	Untreated	Methylene Blue	102 (80)	6 (7)	9 (4)
86 (86)	Sterilised	Turbidity Test	86 (86)	- (-)	- (-)
133 (114)	Ultra Heat Treated	Colony Count	133 (114)	- (-)	- (-)

(1968 figures in parenthesis)

Milk in Schools Scheme and Sampling from Residential Establishments and Training Centres etc.

Total samples	:	419
Satisfactory	. . . . .	391
Unsatisfactory	. . . . .	13
Void	. . . . .	15

Brucellosis

The number of dairy farms in Essex registered under the Milk and Dairies (General) Regulations, 1949 was 520 at the end of the year and the number of dairy farms within the Brucellosis (Accredited Herds) Scheme was 148. This represented about 50 per cent of the County's dairy cattle.

The primary aim of the scheme was to build up a pool of brucella free herds from which farmers will be able to obtain healthy replacement stock. The problems caused by selling reactor cattle in open markets is to be dealt with by legislation and this practice should then be illegal.

A total of 212 samples of raw (untreated) milk from 18 herds were examined for the presence of brucella abortus, of which 16 samples gave positive results.

District Medical Officers of Health and the Ministry of Agriculture, Fisheries and Food were informed of the positive results.

Herd sampling at two farms was carried out by County Council officers on behalf of District Councils.

Tuberculosis

45 samples of raw milk were examined for the presence of tuberculin bacilli. All proved negative.

Antibiotics

During the year the Government accepted, in general, proposals for restricting the type of antibiotics which should be available without prescription. The proposals provide that farmers should be restricted to antibacterial drugs having little or no therapeutic application in medical or veterinary practice, and consultations on the recommendations are proceeding.

217 samples of untreated milk were examined for the presence of antibiotics. 3 gave positive results.

Milk producers selling milk containing antibiotics not only risk prosecution, but are also likely to receive considerably reduced payment from the Milk Marketing Board.

Ice-Cream and Ice-Lollies

Results of samples submitted for bacteriological examination were as follows:-

Ice-Cream		Ice-lollies	
*Grade I	= 940	Satisfactory	= 76
Grade II	= 138	Unsatisfactory	= 0
Grade III	= 72		
Grade IV	= 27		
Total	1177	Total	76

Total number of Ice-creams and Ice-lollies: = 1,253

Time taken to reduce methylene blue

*Grade I	Fails to reduce in 4 hours
Grade II	Fails to reduce in 2½ - 4 hours
Grade III	Fails to reduce in ½ - 2 hours
Grade IV	Fails to reduce in 0 hours

REFUSE DISPOSAL

36 consents to deposit refuse had been issued by the end of the year under Section 46 of the Essex County Council (Canvey Island Approaches Etc.) Act, 1967 which came into operation on 1st April 1968. Consultations were held with officers of District Councils, statutory water undertakers and River Authorities to agree terms and conditions for each tip prior to consents being issued. Co-operation between authorities has been very satisfactory and full regard is paid to the dangers of water pollution and to possible public health nuisances when applications to tip are considered.

Over 760,000 tons of refuse from 11 London Boroughs were transported by river barge and road transport to five refuse tips in the County during the year. The volume of pulverised refuse from the Greater London area is likely to increase in the future. It has been suggested that by the end of the century the volume of refuse produced will have increased by at least 300%. Incineration and pulverisation are therefore clearly desirable both to reduce bulk and, equally important, to produce a more acceptable material for land filling.

Three large Thameside tips in the County continue to receive vast quantities of various industrial wastes. Over 3½ million gallons of liquid waste; much originating from industrial undertakings in Hertfordshire, are deposited yearly on tip sites at Mucking, East Tilbury and Pitsea. The Technical Committee's report on Disposal of Toxic Waste which, it is hoped, will give guidance on more satisfactory methods of disposal is still awaited.

There exists a total of 100 refuse tips in the County, and 515 inspections were made. Visits to tips at which tipping conditions are regulated by planning permissions are included in this figure.

An improvement in the operation of tips has been noted during the year and the number of complaints made about nuisances from tipping are minimal.

Various studies are being undertaken throughout the County on the question of future refuse disposal methods and on the possibilities of greater co-operation between local authorities.

The Local Government Operational Research Unit is carrying out such a study on behalf of a number of authorities in South East Essex, including the consideration of schemes whereby two or more authorities might share a pulveriser, incinerator or other plant.

Combined schemes for refuse disposal already operational, are as follows:-

Shrub End Refuse Tip, Colchester

Used by the Colchester Borough, West Mersea Urban District, and Lexden and Winstree Rural District Councils.

Martin's Farm Refuse Tip, St. Osyth

Used by the Clacton Urban and Tendring Rural District Councils.

Two Tree Island, Leigh-on-Sea

Used by the Southend County Borough, Rayleigh Urban District and Rochford Rural District Councils.

Broomfield

Used by the Chelmsford Borough and Chelmsford Rural District Councils.

Foxborough Hills, Halstead

Used by Halstead Urban and Halstead Rural District Councils.

Paynes Lane, Nazeing Refuse Tip

Used by the Waltham Holy Cross Urban District Council and partly by Epping and Ongar Rural District Council.

Bobbingworth Refuse Tip

Used by the Epping Urban District Council and partly by Epping and Ongar Rural District Council.

RURAL HOUSING

During the year Rural District Councils continued to encourage the improvement of dwellings by way of grant.

The grant system for the modernisation of older houses was introduced in 1949. The results, however, despite many campaigns and the contributing provisions of the Housing Act, 1957, the Housing (Financial Provisions) Act, 1958 and the Housing Act, 1964 have remained generally disappointing. As an indication of the Ministry of Housing and Local Government's attitude towards the matter the last mentioned Act introduced compulsory improvement powers. In July 1969 a further step was taken in an effort to speed up the rate of house improvement in the shape of the Housing Act, 1969. The Act, inter alia, makes more generous financial assistance available to house owners, widens the scope of grant, alters the legal standard of fitness for human habitation, gives local authorities much wider powers for the enforcement of repairs and scope to encourage improvement in place of compulsory improvement and makes provision for better living conditions by improving amenities of areas or dwellings therein.

The amounts of grant made by the respective rural authorities throughout the year and the numbers of dwellings concerned are as follows:-

Rural District	No. of Dwellings	Grants Paid £
<i>Braintree</i>		
Conversions	-	-
Improvements	41	10,547
<i>Chelmsford</i>		
Conversions	-	-
Improvements	27	2,928

Rural District	No. of Dwellings	Grants Paid £
<i>Dunmow</i>		
Conversions	1	400
Improvements	30	6,504
<i>Epping and Ongar</i>		
Conversions	-	-
Improvements	45	9,974
<i>Halstead</i>		
Conversions	3	1,200
Improvements	9	2,853
<i>Lexden and Winstree</i>		
Conversions	-	-
Improvements	87	17,966
<i>Maldon</i>		
Conversions	2	800
Improvements	40	11,496
<i>Rochford</i>		
Conversions	-	-
Improvements	21	816
<i>Saffron Walden</i>		
Conversions	-	-
Improvements	71	19,051
<i>Tendring</i>		
Conversions	-	-
Improvements	61	10,555

The progress made in the repair, closure and demolition of housing is given in the following table:-

UNFIT DWELLING - HOUSES REPAIRED, CLOSED OR DEMOLISHED

Rural District Council	Houses made fit and houses in- which defects were remedied	Houses closed	Houses Demolished
Braintree	63	-	24
Chelmsford	3	-	5
Dunmow	6	11	11
Epping and Ongar	48	12	12
Halstead	*	*	8
Lexden and Winstree	348	8	14
Maldon	65	13	13
Rochford	4	-	34
Saffron Walden	23	30	1
Tendring	50	-	31

*Due to staffing difficulties R.D.C. return not completed in these respects.

Being of doubtful value, and in two cases not forthcoming, the local authorities' estimates of the numbers of houses remaining unfit for human habitation and the number of years for dealing with them have been omitted from the above table.

As shown in Table VI there was an overall increase in house building by rural authorities but a decrease in private enterprise activity. As hitherto the highest development in both categories took place in the Chelmsford Rural District.

In general the number of persons in urgent need of rehousing continued to fall.

FOOD PREMISES

During the year a total of over 800 eating utensils, culinary equipment and working surfaces at 42 old people's homes and schools were swabbed to assess the numbers of bacteria remaining after cleansing.

Results have indicated that the methods of cleansing continue to be satisfactory and the kitchen staffs concerned have maintained a high standard of hygiene.

ESSEX COUNTY COUNCIL ACT, 1933

Establishments for Massage or Special Treatment

A total of 67 premises at which physiotherapists, chiropodists etc. practise are licensed by the County Council. Four new licences were issued during the year. Two slimming clinics, one for use by both sexes and the other for ladies are included in the list of licensed premises.

175 inspections were made during the year and it was found that premises were generally very satisfactory.

AIR POLLUTION

Data has been provided by the Ministry of Technology, Warren Spring Laboratory, Stevenage, Herts, concerning daily observations of smoke and sulphur dioxide (SO₂) concentration at the following sites in the County during the period April 1968 to March 1969.

Details are as follows:-

Location of Site	Mean Concentration of Smoke (a) Summer (b) Winter (c) Year (microgrammes per cubic metre)	Mean Concentration of Sulphur Dioxide (SO ₂) (a) Summer (b) Winter (c) Year (microgrammes per cubic metre)	Highest Daily Concen- tration of smoke	Highest daily concen- tration of sulphur dioxide (SO ₂)
(28.6 ug/m ³ = 1 part per million (by volume))				
*Basildon	(a) 13 (b) 43 (c) 28	(a) 53 (b) - (c) 86	182 119	362
Canvey Island	(a) 19 (b) 47 (c) 34	(a) 50 (b) - (c) -	183	313
Chigwell	(a) 21 (b) 69 (c) 46	(a) 79 (b) 145 (c) 113	269	384
Clacton-on-Sea	(a) 16 (b) 51 (c) 33	(a) 37 (b) 67 (c) 51	205	205
Hadleigh	(a) 15 (b) 37 (c) 25	(a) 45 (b) 77 (c) 60	168	243
Kelvedon Hatch	(a) 11 (b) 34 (c) 21	(a) 45 (b) 71 (c) 57	158	224
Mountnessing	(a) 11 (b) 34 (c) 22	(a) 50 (b) 68 (c) 59	317	277
Rayleigh	(a) 16 (b) 43 (c) 30	(a) 48 (b) 77 (c) 63	137	250
Saffron Walden	(a) 17 (b) 72 (c) 44	(a) 37 (b) 90 (c) 63	277	255
Stanford-le-Hope	(a) 21 (b) 65 (c) 43	(a) 67 (b) 118 (c) 93	302	415
Stifford	(a) 11 (b) 33 (c) 23	(a) 62 (b) 108 (c) 87	180	478

Thurrock 6 (Health Centre, Darenth Lane, S. Ockendon)	(a) 18 (b) 52 (c) 35	(a) 51 (b) 101 (c) 76	227	437
Weeley	(a) 10 (b) 23 (c) 17	(a) 28 (b) 48 (c) 38	75	103
*Barking 10 (Eastbury House, Eastbury Sq., Barking)	(a) 35 (b) 66 (c) 50	(a) 124 (b) 183 (c) 153	250	590
*Dagenham 4 (Thompson Road Clinic)	(a) 24 (b) 69 (c) 45	(a) 89 (b) 171 (c) 127	367	846

(Data were provided for sites located at Ardleigh, Braintree, Halstead, Harlow, Little Horkesley, Tilbury/Thurrock, Waltham Holy Cross and Witham but as the information is incomplete details have been excluded from the table).

*The figures for the sites located at Eastbury House, Eastbury Square, Barking and Thompson Road Clinic, Dagenham have been included as a matter of interest and may be compared with the figures for Basildon. All three sites are situated in residential areas with medium density housing, typically inner suburbs or housing estates, surrounded by built up areas. Smoke Control Orders are in existence in each area.

The Urban District Councils of Basildon, Brentwood, Harlow, Thurrock and Waltham Holy Cross, all within the southern part of the County, have made Smoke Control Orders. Shortages of solid smokeless fuel supplies have resulted in the deferment of 2 new orders until 1971.

Details of Smoke Control Areas in the County are as follows:-

District	Acreage	Total No. of Dwellings	Remarks
Basildon Urban	4,128	19,207	8 areas within Basildon New Town are subject to Smoke Control. Preparation of a further area of approximately 1,700 dwellings to be the subject of a Smoke Control Order has been deferred until after the Spring of 1971.
Brentwood Urban	227	2,856	6 Smoke Control Areas are in operation.

District	Acreage	Total No. of Dwellings	Remarks
Harlow Urban	5,889	16,611	The whole of the residential area is subject to Smoke Control Orders.
Thurrock Urban	4,636	11,780	6 Smoke Control Orders are in operation. A further Order in respect of 503 acres and 835 dwellings has been deferred until 1st April 1971.
Waltham Holy Cross Urban	299	785	4 Smoke Control Orders are in operation.
Total	15,179	51,239	

The assessment of smoke stains by means of a reflectometer is undertaken monthly by the County Council on behalf of seven Authorities within the County and the readings are notified to Warren Spring Laboratory.

PUBLIC SWIMMING POOLS

There are 9 outdoor and 8 indoor swimming pools open to the public in the County. These include the Chelmsford Borough Council's pool with both outdoor and indoor swimming. 16 pools are owned by District Councils and 1 by a Parish Council.

Most of the 9 outdoor pools (8 unheated, 1 heated) have been in existence for many years. Only 2, at Chigwell and Harwich are of post-war construction. 6 are considered satisfactory in regard to rate of water circulation, filtration and purification. The pools at Maldon and Tollesbury, owned respectively by Maldon Borough Council and Tollesbury Parish Council, are of elementary construction and both use water from the River Blackwater estuary. The pool at Brightlingsea, owned by Brightlingsea Urban District Council, has the Colne estuary as its source of water supply and similarly has no system of water circulation or filtration. Chlorine is added by hand.

Of the 8 indoor heated pools, many of recent construction, 7 have satisfactory methods of water treatment. The pool at Parsonage Street, Halstead, owned by Halstead Urban District Council, is the exception. It is small in size (60 feet x 27 feet), was constructed as long ago as 1914, and has no form of water circulation or filtration. Chlorination is undertaken by hand.

Various schemes for new and replacement pools are being prepared, including indoor pools at Colchester and Thurrock.

Over 300 schools make use of the swimming facilities provided by District Councils, but an increasing number of schools now have their own pools. There are, at present, about 150 school swimming pools in the County.

FOOD AND DRUGS ACT, 1955

A Summary of the Work of the Weights and Measures Department

The Chief Inspector of Weights and Measures has kindly provided the following information on the discharge of the County Council's responsibilities under the Food and Drugs Act, 1955:-

"As a Food and Drugs Authority, the County Council have a duty to take steps to ensure that all food and drugs sold within their area of responsibility are of the nature, substance and quality demanded by the purchaser.

The Weights and Measures Department - which operates under the direction of the Special Purposes Committee of the County Council - is responsible for practical administration and enforcement of the statutory provisions, and during the year, 849 samples of milk and 776 samples of other foodstuffs and drugs were procured for analysis. Most of the samples of milk were tested for quality in the Department's own laboratory, and where samples were found to be of poor quality or adulterated with water, follow-up samples were submitted to the Public Analyst.

Seventeen samples of milk were found upon analysis to be unsatisfactory and each was the subject of appropriate action.

A sample of Channel Islands milk taken from a roundsman in the street was found upon analysis to contain at least 6% of added water. Proceedings were instituted against the dairy and a fine of £20. 0. 0d. was imposed and costs of £7. 4. 0d. awarded.

Of the 776 other samples of foodstuffs 22 were the subject of adverse reports and five of these resulted in prosecutions, details of which are as follows:-

A loaf of bread, the subject of a complaint, was found upon examination to contain portions of cigarette ends. A fine of £10. 0. 0d. was imposed and £6. 18. 0d. costs awarded.

A fruit loaf containing foreign matter consisting of a piece of cloth measuring approximately 3 inches by 2 inches was found having the general characteristics of a portion of a flour bag. A fine of £15. 0. 0d. was imposed and £5. 0. 0d. costs awarded.

Another fruit malt loaf was the subject of complaint and upon analysis was found to contain an irregular shaped piece of thin glass measuring approximately 8 x 10 x 1 millimetre. A fine of £5. 0. 0d. was imposed and costs of £5. 19. 0d. awarded.

Sausages displayed in a shop window were alleged to contain 85% of pork. Upon analysis they were found to contain only 74%. A fine of £10. 0. 0d. was imposed and costs of £5. 5. 0d. awarded.

Beef sausages supplied to a County Establishment were found to contain lengths of iron wire each measuring at least 37 mm. long. Proceedings were instituted and a fine of £20. 0. 0d. was imposed and £6. 6. 0d. costs awarded.

Under the Labelling of Food Order 1,745 articles were examined to ascertain that they were properly labelled with particulars as to their composition, and where samples were procured for analysis, the Public Analyst was informed as to the compositional particulars given upon the labels in order that he might check the accuracy of the claims made thereon."

SECTION III-THE CARE OF MOTHERS AND YOUNG CHILDREN

Health Centres and Health Services Clinics

New clinics were opened at Corringham and West Mersea, the extension of the Aveley Health Centre was completed and work commenced on a new clinic at Colchester.

Tenders were invited for the erection of a health centre at Laindon and planning commenced on new centres at Vange and Grays and extensions to the clinics at Tilbury, South Ockendon and South Benfleet.

Child Health Centres

Two hundred and seventeen Child Health Centres, of which 51 were in purpose-built buildings, 13 in adapted premises and 153 in hired accommodation, were provided by the County Council at the end of 1969. 49,230 children attended the centres, making a total of 287,746 visits during the year.

New centres started and centres discontinued during the year were as follows:-

New Centres started	Centres discontinued
Health Services Clinic, Bradfield Road, West Mersea	Health Services Clinic, Main Road, Harwich
Health Services Clinic, Giffords Cross Road, Corringham	Church Hall, West Mersea
Health Services Clinic, Sydervelt Road, Canvey Island	Church Hall, Rivenhall
	Methodist Room, Wix
	Parish Room, Elmdon
Village Hall, Marks Tey	Village Hall, Upshire
Village Hall, Ashingdon	(Breach Barns Caravan Site
Village Hall, Fyfield	(Galley Hill, Waltham Abbey
Methodist Church Hall, Chrishall	Old Age Pensioners' Hall, Corringham

Distribution of Welfare Foods

The scheme for the distribution of welfare foods continued throughout the year. There were 287 distribution centres (120 in Health Services Clinics and 167 in various other premises) for this purpose in the Administrative County compared with 286 in 1968. The amounts of the various welfare foods, including National Dried Milk, distributed to beneficiaries during 1969, together with comparative figures for 1968, are as follows:-

	1969	1968
Orange Juice (bottles)	440,507	396,603
Vitamins A & D tablets (packets)	18,876	22,303
Cod Liver Oil (Vitamins A & D) (bottles)	20,498	21,204
National Dried Milk (tins)	88,477	122,269

Medicaments and Nutriment

The scheme for the supply of free medicaments to mothers and young children and the sale of nutriment on the approved list continued throughout the year.

Dental Inspection and Treatment

The report on the County Dental Service by the Chief Dental Officer will be found on page 77

Details of the dental treatment provided for expectant and nursing mothers and for young pre-school children during 1969 are given in the following table:-

	Children 0-4 years of age inclusive		Expectant and Nursing Mothers	
First Visits (Patients actually treated)	1,395	(1,324)	285	(323)
Subsequent Visits	1,911	(2,147)	525	(738)
Total Visits	3,306	(3,471)	810	(1,061)
Additional Courses of treatment commenced during the year	115	(162)	28	(31)
Number of Fillings	3,064	(3,221)	687	(939)
Teeth Filled	2,747	(2,870)	612	(809)
Teeth Extracted	747	(818)	220	(290)
General Anaesthetics	408	(436)	24	(33)
Emergency Visits by Patients	230	(244)	40	(52)
Patients X-rayed	20	(17)	45	(57)
Prophylaxis (scaling and polishing)	216	(176)	183	(212)
Teeth otherwise considered	806	(832)	-	(-)
Teeth root filled	-	(-)	4	(13)
Inlays	-	(-)	3	(2)
Crowns	-	(-)	9	(7)
Courses of Treatment completed	1,079	(1,275)	258	(297)
Number of dentures supplied	-	(-)	36	(33)
Number of patients given first inspections during year	A3,245	(3,180)	D346	(458)
Number of patients in A & D above who required treatment	B1,545	(1,644)	E292	(385)
Number of patients in B & E who were offered treatment	1,518	(1,587)	289	(378)

The figures in parenthesis refer to the year 1968 and are included for comparison

Detection and Treatment of Phenylpyruvic Oligophrenia

30,849 urine tests were made under the scheme for the detection and treatment of phenylpyruvic oligophrenia during 1969, 16,510 first tests and 14,339 re-tests. No case was found to be positive.

Day Nurseries

The six day nurseries, four of which are approved for training purposes, continued to function throughout the year. The number of places provided was 250 and over the whole year the average daily attendance was 211.

A site for a day nursery was acquired at South Benfleet.

Daily Guardians

At the end of 1969 there were only 2 daily guardians in the Administrative County, these being in the South-East Essex Health Area and care was provided for 3 children.

Nurseries and Child Minders Regulation Act, 1948 (as amended)

At the end of 1969 the number of premises and child minders registered by the County Council in accordance with the requirements of the Nurseries and Child Minders Regulation Act, 1968, together with the number of children for whom provision was being made, is shown below:-

Health Area/ Delegatee Authority	NURSERIES		CHILD MINDERS	
	Number Registered	Number of children provided for	Number Registered	Number of children provided for
North-East Essex	35	641	86	444
Mid-Essex	86	2,260	142	825
South-East Essex	34	710	95	353
West Essex	67	1,699	115	526
Harlow	24	709	66	181
Thurrock	25	639	31	105
Basildon	40	943	76	206
Colchester	17	434	23	136
TOTAL	328	8,035	634	2,776

30 nurseries provided all day care for 977 children
298 nurseries provided sessional care for 7,058 children
324 child minders provided all day care for 916 children
310 child minders provided sessional care for 1,860 children

The numbers of children attending private or voluntary day care facilities at the end of the year who were placed and are paid for by the County Council was:-

11 with child minders, 5 with all-day care nurseries
19 with part-time nursery groups

Convalescent Treatment

In accordance with arrangements made under Section 22 of the National Health Service Act, 1946, recuperative holidays were provided for 4 mothers and 7 young children during the year.

Child Development Sessions

Child development sessions are held at 23 centres providing a total of 181 places. The average daily attendance during the year was 47 and at the end of the year, 97 children were on the priority waiting list.

Boarded-Out Children

Five hundred and seventy children who were boarded-out were medically examined during the year in accordance with the usual arrangements. Action was taken to ensure that the 210 children reported to have some medical defect, either received treatment or were placed under observation. The majority of these medical examinations are undertaken by general medical practitioners, but a small number are carried out by County Council medical staff.

Congenital Malformations apparent at birth

Cases of congenital malformations apparent at birth continue to be reported by the doctor or midwife notifying the birth and during 1969, 346 live and stillborn infants were so reported. This number of cases is equivalent to 16.9 per 1,000 births compared with 14.8 in 1968 and 16.2 in 1967.

As from the beginning of 1969, the defect groups were revised to conform with the rubrics of the 1965 revision of the International Classification of Diseases, Injuries and Causes of Death and this has meant some slight revision of the types of malformation shown in the following table. In this children recorded as having more than one malformation are included in the group appropriate to each malformation.

Congenital Malformations apparent at Birth Recorded in 1969
with numbers in 1968 (where available) in parenthesis

Code No.	Defect	M	F	TOTAL		Rate per 1,000 Births
01	Anencephalus	4	15	19	(17)	0.9
04	Hydrocephalus	7	8	15	(18)	0.7
08	Spina bifida	12	15	27	(31)	1.3
05,06,09	Other malformations of central nervous system	8	3	11	(11)	0.5
10-13	Malformations of eye	1	1	2	(2)	0.1
16-19	Malformations of ear	3	4	7	(3)	0.3
21	Cleft lip	13	8	21	(20)	1.0
22	Cleft palate	8	7	15	(23)	0.7
20,23-29	Other malformations of alimentary system	12	5	17	(13)	0.8
30-39	Malformations of the heart and great vessels	2	3	5	(4)	0.2
40-49	Malformations of the respiratory system	1	-	1	(2)	0.0
57	Hypospadias, epispadias	22	-	22	(23)	1.1
50-56,59	Other malformations of urino-genital system	26	1	27	(19)	1.3
60	Polydactyly	7	5	12	(13)	0.6
61	Syndactyly	4	3	7	(3)	0.3
62-64	Reduction deformities	3	4	7	(3)	0.3
65	Talipes	38	38	76	(74)	3.7
66	Congenital dislocation of hip	9	12	21	(16)	1.0
67-69	Other malformations of limbs	12	9	21		1.0
70-75	Other musculo-skeletal malformations	7	7	14		0.7
80,81	Malformations of face and neck	3	1	4	(7)	0.2
82-84	Malformations of muscles, skin and fascia	8	13	21		1.0
96	Down's syndrome (Mongolism)	3	6	9	(12)	0.4
85-95,98,99	Other specified and unspecified malformations	7	8	15		0.7
Total No. of Children		190	156	346	(303)	16.9

Thirty five or about 10% of all the infants reported were stillborn. Of those 15 had anencephalus and 10 had other malformations of the central nervous system.

The numbers of each of the congenital malformations recorded has varied slightly from year to year but none to an extent as to suggest any change in incidence. The following table gives the incidence of some of the main types of malformation for the five years 1965-1969 as a whole:-

CONGENITAL MALFORMATIONS, 1965 - 69

DEFECT	No. of Malformations			Rate per 1,000 births		
	Males	Females	Total	Males	Females	Total
Anencephalus	28	68	96	0.54	1.39	0.95
Spina bifida	60	71	131	1.15	1.45	1.30
Cleft lip	67	36	103	1.29	0.74	1.02
Cleft palate	59	40	99	1.13	0.82	0.98
Hypospadias, epispadias	113	-	113	2.17	-	1.12
Polydactyly	36	21	57	0.69	0.43	0.56
Talipes	205	188	393	3.94	3.85	3.89
Mongolism	29	36	65	0.56	0.74	0.64

The incidence of anencephalus was significantly higher for females than for males and for cleft lip significantly higher for males than for females but the female excess for spina bifida and mongolism and the male excess for cleft palate and polydactyly are not statistically significant.

Audiology Service

In accordance with the agreement made with the North East Metropolitan Regional Hospital Board to which I referred in my previous Report, the arrangements whereby the Board provided the services of a consultant otologist were terminated during the year. Since however there is much advantage to be gained from the employment of such specialists, Dr. A. N. Cammock, E.N.T. Consultant, was offered a contract of two sessions weekly and continued to attend the three audiology clinics at Chelmsford, Colchester and Rayleigh.

During the year, a fourth audiology clinic commenced at Harlow and arrangements are being made for the establishment of a fifth clinic at Thurrock in 1970.

SECTION IV - THE MIDWIFERY, HOME NURSING AND HEALTH VISITING SERVICES

MIDWIFERY

The following table shows the number of midwives (excluding those employed by Hospital Management Committees or Boards of Governors under the National Health Service Act, 1946) who notified their intention to practise in accordance with the provisions of the Midwives Act, 1951:-

Form of Practice	Domiciliary Midwives	Other Midwives	Total
(a) Domiciliary Midwives employed by the Authority	199	-	199
(b) Other Midwives - employed in Nursing Homes or in private practice	-	13	13
	199	13	212

The midwives employed by the County Council attended 4,747 confinements during 1969 and in only 36 of these cases was a doctor not booked for the confinement.

15,674 of the 20,458 births notified in accordance with Section 303 of the Public Health Act, 1936 occurred in hospital in the year under review (i.e. 76.6%). As will be seen by the following table in all but one area the percentage of confinements in hospital increased in 1969:-

	1967	1968	1969
North-East Essex	88.3	90.8	92.4
Mid-Essex	72.3	75.0	79.5
South-East Essex	52.5	58.9	63.9
West Essex	76.2	77.8	76.3
Harlow	77.1	83.8	87.6
Thurrock	52.8	59.9	63.9
Basildon U.D.C.	60.3	62.4	64.2
Colchester M.B.C.	85.3	84.0	91.1

Early discharge of maternity patients from hospital

During the year the arrangement whereby maternity patients confined in hospital were discharged before the expiration of the lying-in period to the care of general medical practitioners and domiciliary midwives continued: a total number of 6,814 were so discharged, of which 2,604 were within the first 48 hours.

Analgesia

In 1969, 77.2 per cent of the patients confined at home received inhalational analgesia which all 199 domiciliary midwives employed by the County Council were qualified to administer in accordance with the requirements of the Central Midwives Board. The number of cases and types of analgesia employed are shown below:-

Gas and Oxygen	2,221
Gas and Air	86
Trilene	1,359
Pethidine	2,859

Ante-natal and Post-natal clinics

Attendances at ante-natal and post-natal clinics during 1969 are as set out in the following table:-

	No. of Women in attendance	No. of Attendances	
		At Medical Officers' Sessions	At Midwives' Sessions
For ante-natal examination	5,184	6,924	12,224
For post-natal examination	26	33	

Classes in mothercraft and relaxation continued to be provided for expectant mothers attending the County Council ante-natal clinics; 3,704 expectant mothers attended these classes during the year, of whom 2,908 were booked for confinement in hospital and 798 for confinement at home. The total number of attendances was 22,707.

Ophthalmia Neonatorum

Three cases of ophthalmia neonatorum were notified during 1969.

Maternal Deaths

Five deaths attributed to pregnancy, childbirth or abortion were notified in 1969 compared with 2 in 1968. This gives a maternal death rate for the Administrative County of 0.25 per thousand live births as against the national rate for England and Wales of 0.19.

Care of Unmarried Mothers and their babies

The arrangements made by the County Council with the Chelmsford Diocesan Moral Welfare Association for the care of unmarried mothers and their babies, continued throughout the year under review. 139 mothers were admitted to hostels in the Administrative County and a further 34 to hostels outside the County.

Training of Pupil Midwives

During the year under review, 117 pupil midwives undertaking second period training at hospital training schools received or were receiving domiciliary experience under arrangements made with Hospital Management Committees whereby the County Council provide domiciliary training facilities for pupil midwives over a period of three months, under the supervision of teaching district midwives.

Due to the continuing decrease in domiciliary confinements, some areas are finding it increasingly difficult to provide the relevant number of cases for the training of pupil midwives.

Domiciliary Midwives working in General Practitioner Units

During the year Essex has reflected the continuing national trend for women to be admitted to hospital for confinement and discharged early to their homes.

For this reason there has been some demand for the County Council's domiciliary midwives to deliver babies in general practitioner units of hospitals, the mother and baby being returned home within 48 hours and for the midwife to continue providing services during the lying-in period:

In order to meet these changing needs, schemes of this nature have been arranged with Princess Alexandra Hospital, Harlow, St. Peter's Hospital, Maldon and Brentwood Maternity Hospital.

From the reports that have been received, these schemes appear to be working very satisfactorily.

HOME NURSING

18,669 patients were attended by home nurses during 1969, an increase of 294 over the previous year, and a total of 469,858 visits were made to these patients as against 453,014 last year. The patients and visits were in the following age groups:-

Age Group	Number of patients visited	Number of visits paid
Under 5 years of age	325	1,917
Over 5 and under 65 years	5,935	109,285
Over 65 years of age	12,409	358,656
All ages	18,669	469,858

A survey which had been undertaken revealed that many home nurses and home nurse/midwives were doing some work which could equally well be done by State Enrolled Nurses or by a non-nursing auxiliary.

It was therefore decided that as and when vacancies occur State Enrolled Nurses should be appointed up to 40 per cent of the home nursing establishment and district auxiliaries (who would carry out simple nursing procedures such as washing and bathing patients in bed in their own homes, care of hands and feet, lifting and moving patients) up to 20 per cent of the establishment.

The first district auxiliaries started work in the South-East Essex Health Area on a part-time basis and spent the first few days attending an in-service training course arranged in their own area.

Uniforms

In 1969 a new type two-piece uniform dress for home nurses was introduced. This garment which is available in either hospital blue or royal blue has been designed so as to give complete freedom of movement for modern methods of lifting patients and if for any reason the wearing of a two-piece is impracticable, a one-piece garment in exactly the same style as the two-piece is available. Disposable polythene aprons have been provided to wear with this new style uniform.

HEALTH VISITING

Home Visits

The Health Visitors employed by the County Council made 202,620 visits to 87,272 persons in their own homes during the year in question. The various categories are shown in the following table:-

Age Group	Number of patients visited	Number of visits paid
Under 5 years of age	72,078	162,566
65 years of age and over	7,674	21,281
Others	7,520	18,773
Total (all ages)	87,272	202,620

Difficulties caused by a shortage of qualified health visitors in some parts of the County continue to give rise to concern. However, there has been a steady increase in the recruitment of student health visitors and all 13 students who commenced training in 1968 were successful in passing the

examination in 1969 for the Health Visitors Certificate. Twenty students commenced training in September 1969 and will complete their training twelve months later. There should therefore be a steady improvement in the staffing position which it is hoped to maintain in future years.

Preparation for Childbirth

As in previous years courses of instruction on preparation for childbirth, each of three days' duration, were organised for health visitors and midwives. During the year two such courses, each attended by 35 health visitors, domiciliary midwives and hospital midwives were held at the Medical Academic Unit at the Chelmsford and Essex Hospital under the direction of Mrs. M. Williams, M.C.S.P., Chairman of the Obstetric Association of Chartered Physiotherapists and were much appreciated by all who attended.

ATTACHMENT OF HEALTH VISITING, MIDWIFERY AND HOME NURSING STAFF TO GENERAL MEDICAL PRACTICES

Further progress was made during the year in respect of attachment schemes whereby health visitors, domiciliary midwives and home nurses are allocated to specific general medical practices and are responsible for all the patients who reside in the local health authority's area who are on the general practitioners' lists.

There has also been an extension in the number of liaison schemes. Under this arrangement the health visitor, domiciliary midwife or home nurse is responsible for all the patients of a specified general medical practice dealing with the patients herself if they reside within her district or liaising with the other nursing staff concerned if they live elsewhere, within the local health authority's area.

The number of attachment and liaison schemes at the end of 1969 is as follows:-

Category of Staff	No. employed in Attachment Schemes	No. employed in Liaison Schemes
Health Visitor	25	58
Midwife	49	4
Home Nurse/Midwife	3	8
Home Nurse	49	7
District Auxiliary	-	3

SECTION V - PREVENTIVE MEDICINE

CARE AND AFTER-CARE TUBERCULOSIS

One-hundred and fifty four cases of respiratory and non-respiratory tuberculosis were notified by Medical Officers of Health in 1969. This figure, compared with 190 cases in 1968, represents a decrease of 36 (34 respiratory and 2 non-respiratory).

The details of age and sex distribution are given below:-

	Sex	0-	2-	5-	15-	25-	35-	45-	55-	65-	75-	Not Known	Total all ages
Respiratory	M	1	2	10	3	10	8	16	7	12	6	1	76
	F	1	3	7	2	13	7	5	6	4	3	-	51
Non-Respiratory	M	-	-	-	1	1	-	1	2	-	1	1	7
	F	-	1	2	1	5	3	-	1	3	4	-	20

The number of primary notifications and deaths in County Districts of the Administrative County for the years from 1963 to 1969 are shown in the following table:-

	Respiratory Tuberculosis		Non-Respiratory Tuberculosis		Tuberculosis (all forms)			
	No. of Notifications	No. of Deaths	No. of Notifications	No. of Deaths	No. of Notifications	No. of Deaths	Rate p. 1000 pop. Notifications	Deaths
1963	253	29	32	3	285	32	0.25	0.03
1964	237	25	36	2	273	27	0.23	0.02
1965	209	28	33	4	242	32	0.20	0.03
1966	166	24	26	5	192	29	0.18	0.03
1967	176	34	31	2	207	36	0.19	0.04
1968	161	17	29	9	190	26	0.17	0.02
1969	127	14	27	11*	154	25	0.13	0.02

*including late effects of respiratory tuberculosis

Domiciliary Visits

Tuberculosis visitors attended 270 tuberculosis households and health visitors made visits to 710, the total number of households visited being 980.

Follow-up of Contacts

During 1969 the total number of examinations was 6,231. Of these, 2,054 were contacts of cases of tuberculosis examined for the first time and 4,177 for subsequent examinations.

Open-Air Shelters

Only one open-air shelter remained in use at the end of the year and was periodically inspected by the Health Visitor.

B.C.G. Vaccination

Throughout the year, the vaccination of contacts of patients suffering from tuberculosis, for whom Mantoux tests had proved negative, continued and the total numbers vaccinated, together with comparative figures for 1968, are as follows:-

	1969	1968
Number of contacts skin tested	1,316	1,170
Number of contacts found to be negative	888	930
Number of contacts found to be positive	356	228
Number of contacts vaccinated	749	909

B.C.G. vaccination of school children and students also continued and details and comparable figures for 1968 are as follows:-

	1969	1968
Number of pupils and students skin-tested	14,279	12,077
Number of pupils and students with:-		
(a) Positive results	911	883
(b) Negative results	12,988	10,873
(c) Vaccination with B.C.G.	11,128	10,327

Extra Nourishment

The scheme for the provision of free milk continued throughout 1969. Forty-nine new tuberculosis cases and twenty new cases of other chest diseases received this service. At the end of the year 353 patients were in receipt of free milk.

Rehabilitation

As in the two previous years, no patients in 1969 received financial assistance towards maintenance at a Rehabilitation Centre.

Mass Radiography

Two mobile radiography units of the North East Metropolitan Regional Hospital Board continued to operate in the administrative county during 1969 when sessions were held at factories, hospitals, etc. A total of 52,690 persons were x-rayed, of whom 29,997 were males and 22,693 were females. This figure compares with 57,738 persons x-rayed in 1968, but it is thought that the introduction of three static units in Ilford has attracted a considerable number of persons residing in the administrative county who have availed themselves of this service.

The Future of the Chest Services

Arising from Ministry of Health Circular 27/68 which confirmed and expanded the advice given in a report issued in 1960 by the Standing Tuberculosis Advisory Committee of the Central Health Services Council, the County Council, with effect from 1st April 1969, terminated the arrangements with the Regional Hospital Boards whereby payments were made by them towards the salaries of chest physicians.

Tuberculosis Care Associations

The County Council continued to make grants to eleven Tuberculosis Care Associations on the basis of £2 per thousand population, plus an amount not exceeding £25 for postages and other petty disbursements.

A total of £4,596 was spent by the Associations as follows (1968 figures are given for comparison):-

	1969 £	1968 £
Milk and groceries	3,435	3,017
Fuel	276	311
Fares	43	119
Clothing, furniture etc.	63	165
Holidays, Outings, etc.	34	97
Diversional Therapy	-	13
Other Grants	234	341
Special efforts	295	164
Printing, postages etc.	216	246
Total	£4,596	£4,473

OTHER ILLNESSES

The arrangements for recuperative convalescence in accordance with Section 28 of the National Health Service Act, 1946 continued and 209 patients were assisted by this service in 1969 as against 265 for 1968.

Loan of Sickroom Equipment

Sickroom equipment was made available, on loan, throughout the year to patients in their homes. The equipment is provided either through home nurses or the health area offices, and the articles on loan at the end of 1969 totalled 6,152.

RENAL DIALYSIS

In accordance with arrangements made under Section 28 of the National Health Service Act, 1946, the County Council, during the year, gave financial assistance towards the cost of carrying out the necessary adaptations to the homes of five patients to enable them to be provided with renal dialysis equipment.

INFECTIOUS DISEASES

The corrected number of notifications of infectious disease^a received by Medical Officers of Health of County Districts during 1969 will be found in Table V on page 86 of the Report.

It is interesting to note the variation in notifications received over the past five years from the following table:-

	1965	1966	1967	1968	1969
Scarlet fever	866	501	606	483	548
Whooping cough	393	454	1,059	611	206
Measles	16,285	5,397	17,507	3,257	4,543
Diphtheria	-	-	-	-	-
Acute poliomyelitis (paralytic)	-	-	2	-	-
Acute poliomyelitis (non-paralytic)	-	-	-	-	-
Acute encephalitis (infective)	2	-	-	1	2
Acute encephalitis (post infectious)	2	1	1	-	4
Acute meningitis*	4	8	6	13	10
Typhoid fever	3	-	4	-	3
Paratyphoid fever	1	3	-	1	1
Dysentery	192	311	504	183	482
Food Poisoning	99	88	132	113	215
Infectious jaundice**	230	134	217	480	372
Tuberculosis, respiratory	209	166	176	161	127
Tuberculosis, meninges and CNS	3	3	1	3	2
Tuberculosis, other	30	23	30	26	25
Ophthalmia neonatorum	3	-	1	-	3
Malaria	5	7	2	-	2
Anthrax	-	-	-	-	-
Leptospirosis	+	+	+	-	1

*meningococcal infection until 1968

**infective hepatitis until 1968

+leptospirosis not notifiable until 1968

The bi-ennial epidemic of measles failed to appear in 1969 and the number of cases notified was less than in an inter-epidemic year. This is probably the result of the measles vaccination campaign. The incidence of dysentery was high in South East Essex but not elsewhere and the number of cases of infectious jaundice notified throughout the Administrative County was above average but less than in 1968.

VACCINATION AND IMMUNISATION

Smallpox

There was a marked decrease in the number of persons under 16 years of age vaccinated or re-vaccinated against smallpox in 1969, compared with the previous year and details for the year under review are as follows:-

	0-3 months	3-6 months	6-9 months	9-12 months	1 year	2-4 years	5-15 years	Total
No. vaccinated	21	60	72	108	5,245	3,719	715	9,940
No re-vaccinated	-	-	-	1	24	292	1,734	2,051

There was one case of generalised vaccinia.

Diphtheria, Whooping Cough, Tetanus and Poliomyelitis

The number of persons under 16 years of age who completed primary courses of injections and received reinforcing doses to protect them against diphtheria, whooping cough, tetanus and poliomyelitis during 1968 are shown in the table below:-

	Year of Birth						Total
	1969	1968	1967	1966	1962-1965	Others under 16 years of age	
Primary Courses							
Diphtheria	1,222	7,876	636	206	524	152	10,616
Whooping Cough	1,212	7,723	576	170	178	34	9,893
Tetanus	1,227	7,891	645	219	625	1,359	11,966
Poliomyelitis	1,112	8,752	1,005	317	683	299	12,168
Reinforcing Doses							
Diphtheria	-	3,299	7,070	849	15,555	1,558	28,331
Whooping Cough	-	3,093	6,447	646	3,851	236	14,273
Tetanus	-	3,314	7,096	904	15,820	3,227	30,361
Poliomyelitis	-	2,173	5,101	599	15,851	3,383	27,107

Details of Antigens given to children are as follows:-

	*Primary Courses	Reinforcing Doses
Quadruple (D.T.P.P.)	-	-
Triple (D. T. P.)	9,892	14,273
Diphtheria/Pertussis	-	-
Diphtheria/Tetanus	694	13,763
Diphtheria	30	295
Pertussis	1	-
Tetanus	1,380	2,325
Poliomyelitis - Salk	97	84
Poliomyelitis - Sabin (oral)	12,071	27,023

*Figures of primary courses affected by new schedule.

Measles

The programme for vaccination against measles suffered a set-back during the year with the withdrawal of vaccine which was not considered to be safe from one of the two manufacturers. The schedule of priorities set out by the Department of Health and Social Security was strictly followed with the vaccine available and the following tables shows the number of children under 16 years of age vaccinated against measles during the year:-

Year of Birth	1969	1968	1967	1966	1962-65	Others under 16 years of age	Total
No. vaccinated	31	2,256	3,593	2,400	4,058	1,401	13,739

Yellow Fever

The centre in the Health Suite at County Hall, Chelmsford continued to provide yellow fever vaccinations during the year under review at a charge of 30s. 0d. per person (an increase of 9s. 0d. over previous years) subject to a reduction in accordance with the County Council's assessment scales. During 1969, 480 persons availed themselves of this service, an increase of 111 over the previous year.

VENEREAL DISEASES

Details of new cases of syphilis, gonorrhoea and other conditions diagnosed at special clinics throughout the Administrative County during 1969 are shown on next page:-

	Syphilis		Gonorrhoea		Other Conditions	
	Male	Female	Male	Female	Male	Female
Chelmsford	-	2	32	21	255	205
Colchester	4	1	44	25	262	181
Harwich	1	1	3	4	50	15
Tilbury	17	1	69	7	530	97
Total	22	5	148	57	1,097	498

After exclusion of seamen and residents of other counties these figures reduce to - Syphilis 9, Gonorrhoea 141, Other conditions 1,214.

On the other hand venereal disease in residents of Essex is diagnosed at clinics outside the Administrative County at Oldchurch Hospital, Romford, Addenbrookes Hospital, Cambridge, The Herts and Essex Hospital, Bishops Stortford and at London Teaching Hospitals. From returns received from these and other clinics it is known that there were 5 other new cases of syphilis, 48 of gonorrhoea and 465 of other venereal conditions but all clinics which might be expected to treat Essex cases did not send returns so the total figures of 14 new cases of syphilis, 189 of gonorrhoea and 1,679 of other venereal conditions are probably not complete.

HEALTH EDUCATION

Health Education is a vital part of public health practice and is considered to be the main hope of controlling some, if not all, of the modern causes of illness and death. The way to good health cannot be imposed on people, each person must be persuaded of the importance of taking positive steps to protect his or her own well-being. The facts of health need to be presented in a convincing manner and this is not an easy task when competing with the commercial advertising of a way of life which is incompatible with the achievement of good health. Spasmodic attempts at health education cannot be successful except, perhaps, where the possibility of an epidemic appears imminent and the general public wish to avail themselves of the services provided through preventive medicine. A continuing process of health education is necessary if success is to be achieved and this, if properly undertaken, should not cause excessive pre-occupation with the acquisition of good health.

The Medical Officer of Health and those members of his staff engaged primarily in health education have an important role to play but there must be other disciplines at other times and levels. For instance teachers may want more information about health topics and to do this, courses will need to be arranged.

During 1969, health education in all its aspects required an all-out effort by members of the central office staff and from those undertaking this work in the Health Areas to meet the increasing demand for their services. There is still a need for increased efforts in a wider field; and serious consideration is being given to extending the scope of health education throughout the administrative county.

Dental Health

The dental health programme for schools in West Essex has continued and a feature of this project has been the increased interest of parents attending the schools on the "open day" and their participation in parent-teachers meetings which are held during school Dental Health "Weeks".

Smoking and Health

An intensive anti-smoking campaign which was directed at the 10 to 13 age group has been carried out in schools in North-East Essex.

Anti-smoking clinics continue to be held in selected Health Areas under the direction of a medical officer and health education staff. It is considered that such clinics play a most useful part in the campaign against smoking.

Misuse of Drugs

Continued interest in the problem of the misuse and abuse of drugs has been shown throughout the year especially by parents who have requested talks and filmshows through the media of their Parent/Teacher associations. These requests have been met, as far as possible, but the staffing situation and the paucity of speakers specialising in this subject has considerably curtailed the programme which would otherwise have reached far greater magnitude. However, this subject has been included in Health Education courses for senior schools. Adult organisations have also requested talks and these requests have been met whenever possible.

Every opportunity has been taken to obtain the most up-to-date information and statistics on this subject and to this end the County Health Education Organiser attended a course of lectures in London sponsored by the Institute for the Study and Treatment of Delinquency on Drug Dependence.

Health Education "Blue Print"

A working party of officers was set up to consider ways and means of extending and improving the methods of teaching health education in schools, and their recommendations should be available in 1970.

Home Safety

Grants were made to eight local Home Safety Committees during the year and assistance given by members of the Health Education central office staff in the loan of equipment and provision of films for their exhibitions.

Exhibitions and Displays

Whenever possible, exhibitions and displays have been given on various aspects of health education at Town Shows and Fetes and at Health Services Clinics throughout the administrative county.

A Health Services Exhibition was again staged at the Essex Show on the 13th and 14th June. Each year different facets of health education are staged and in the year under review the emphasis was on Nutrition and Mental Health with an especial "Health Education through Life" exhibit embracing immunisation and vaccination, sensible toys for children, Home Safety (burns and falls), Dental Health and Smoking and Health. A section of the exhibition was allocated to four voluntary organisations (National Society for Mentally Handicapped Children, National Association for Mental Health, Alcoholics Anonymous and Phoenix Group Homes) who were responsible for their own exhibits. This was the Centenary Show and it is estimated that 20,000 members of the public visited the Health Services Exhibition.

ROUTINE CERVICAL CYTOLOGY

The scheme for routine cervical cytology testing continued throughout the year, the equivalent of 744 sessions being held. A total of 7,394 women were tested, of whom 1,696 were recalled for a second test.

During 1969 the number of positive results (19) was 2.6 per thousand women tested compared with 2.4 last year.

The age-parity of women tested is shown in the following table, and is very similar to that for 1968:-

	Age of Women					Total all ages
	Under 25 years	25-34 years	35-44 years	45-54 years	55 years and over	
Single	26	9	27	11	9	82
Married No Children	83	157	171	126	53	590
Married 1 Child	130	476	407	300	81	1,394
Married 2 Children	140	1,328	993	488	97	3,046
Married 3 Children	27	564	545	230	53	1,419
Married 4 Children	1	174	240	128	27	570
Married 5 or more children	1	60	137	71	28	297
	408	2,768	2,520	1,354	348	7,398

CHIROPODY

There were 51 chiropodists employed in the administrative county at 30th September 1969, working the equivalent of 29 whole-time officers.

The number of sessions worked by these chiropodists amounted to 15,318 with corresponding figures for 1968 shown in parenthesis, as follows:-

At Clinics	9,085	(8,672)
Domiciliary	5,583	(5,234)
Welfare Establishments	650	(537)
Total	15,318	(14,443)

In all categories the number of sessions increased in the year under review.

As in previous years, the County Council continued to make a grant to the Essex Old People's Welfare Association towards assisting Old People's Clubs to run a chiropody service in those areas where directly-provided services are not available. Priority categories, i.e. the aged, physically handicapped and expectant mothers, continued to be treated as the staffing position allowed and visits to the Welfare Committee's homes for the elderly were maintained.

The following table gives details of the cases treated and the number of treatments given:-

Category	No. of Cases treated	Treatments		
		At Clinics	Domiciliary	Welfare Homes
Children	98	519	-	-
Physically Handicapped	316	486	1,107	141
Aged over 65 years	14,020	55,911	23,497	6,294
Others	268	1,334	202	-
Total	14,702	58,250	24,806	6,435

HOME HELP SERVICE

The development of training courses for Home Helps has been extended further during the second year. Three technical colleges and one college of further education are now participating and providing a total of 9 courses a

year. Where problems prevail for home helps from rural areas arrangements are made to hire transport.

In North-East Essex the problem is extremely difficult and only basic training is being undertaken. A condensed course, which is aimed particularly to the care of the elderly, takes place on six half days, spread over a period of six months, in hired accommodation.

Home helps who are required to cook for elderly people find many problems and this aspect is included when they attend training courses. As a result a specially compiled recipe booklet has been produced and 800 copies were distributed during the year.

New coat style overalls for home helps were brought into use. They are in striped kingfisher blue nylon with "Home Help Service" stitched in gold coloured thread. In addition a badge has been specially designed for the service and is given to every help who completes her basic training course.

At the end of the year, the number of home helps employed was as follows:-

Whole-time Helps	6
Regular Part-time Helps	1,318
Other Helps (Casual)	518
Total	1,842

The time worked by these 1,842 helps was equivalent to the whole-time employment of 675 helps.

The following table gives details of cases helped and the hours provided:-

Category	New Cases	Total Cases	Hours provided
Aged persons	2,265	5,642	1,110,730
Chronic Sick (including Tuberculosis) under 65 years	301	911	118,501
Maternity	668	888	18,015
Others	391	548	26,192
Total	3,625	10,989	1,273,438

The 548 'other cases' referred to include:-

Mental disorders under 65 years	38
Acute illness	326
Harrassed mothers	37
Problem families	7
Absence of mothers	67

NEIGHBOURLY HELP SERVICE

During the year, 226 cases received help through this service, an increase of 28 over the previous year.

NIGHT ATTENDANCE SERVICE

The following requests for help were met during the year:-

Requests for help	77
New cases helped	74
Total cases helped:-	
(a) residing alone	25
(b) inability of aged spouse	18
(c) relief of relatives	31
Total	74

NATIONAL HEALTH SERVICE (FAMILY PLANNING) ACT, 1967

The County Council, in 1968, in exercise of the powers conferred upon them by the National Health Service (Family Planning) Act, 1967, approved in principle the making of arrangements through the Family Planning Association for a comprehensive family planning service but as mentioned in last year's report it was not possible to bring the new expanded service into operation in that year due to financial circumstances.

From 1st July 1969, however, arrangements were made for the County Council to take advantage of the facilities provided by the Family Planning Association whereby the Association continued to have the use of Health Services Clinics without charge, took over responsibility for the medical cases previously dealt with by the County Council (being reimbursed by the County Council the actual cost involved in such cases) and give advice and carry out examinations, provide supplies and make charges in hardship cases, subject to an assessment being made under the County Council's Assessment Scales, the Association meeting any remission considered desirable which is not properly allowable within the Assessment Scales.

During the period 1st July 1969 to 31st December 1969 the numbers of cases in each category helped were as follows:-

Medical	. . . . .	202
Social	. . . . .	67
Financial	. . . . .	68

REGISTRATION AND INSPECTION OF NURSING HOMES

There were 10 nursing homes registered by the County Council under Part VI of the Public Health Act, 1936 at the end of 1969.

AGENCIES FOR THE SUPPLY OF NURSES

No nursing agencies were granted registration by the County Council during the year and, as at the end of the previous year, there were no agencies operating in the Administrative County.

FACTORIES ACTS, 1937 AND 1948

During the year the functions of factory doctor in the Borough and the Rural District of Maldon were undertaken by medical staff of the Department. 85 young persons (71 males and 14 females) were examined and certificates of fitness for employment under Section 18 of the Act issued.

NATIONAL ASSISTANCE ACT, 1948

Visits to residential hostels under the jurisdiction of the Welfare Committee were made throughout the year by a Principal Medical Officer on the staff of the Department to give advice and to review arrangements for chiropody treatment to residents.

WELFARE OF THE BLIND AND PARTIALLY SIGHTED

A total of 308 Forms B.D.8 were completed during 1969 in respect of new cases, including 23 found to be defective sighted and 16 who were not eligible for registration.

As a result of these examinations, 168 were registered as blind and 101 as partially sighted. In addition, 242 re-examinations were undertaken with a view to reclassification of the patients concerned and the diagnoses were as follows:-

Blindness	58
Partial sightedness	144
Defective sightedness	29
Not eligible for registration . . .	11

The following table gives a summary of the information obtained in following up all the new cases where treatment was recommended:-

New cases only:-	CAUSE OF DISABILITY			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(1) Number of cases:-				
(a) No treatment	31	17	-	139
(b) Treatment (medical, surgical or optical)	39	38	-	118
(2) Number of cases at (1) (b) above which on follow up:				
(a) Had received treatment	52	26	-	122
(b) Had refused treatment	3	-	-	3

The County Welfare Officer has kindly supplied the following information relating to the registration of persons found to be blind or partially sighted.

The total number of blind persons on the register at the end of 1969 was 2,074 and of these 795 were males and 1,279 females. The age groups of these patients were as follows:-

	Under 16 yrs	16-20	21-29	30-39	40-49	50-59	60-64	65-69	70 & over	Total
Male	22	11	27	40	53	93	59	75	415	795
Female	22	10	21	29	36	64	75	97	925	1,279
Total	44	21	48	69	89	157	134	172	1,340	2,074

At the end of 1969, 693 persons were registered as partially sighted and of these 254 were males and 439 females. The age grouping of the patients were as follows:-

	Under 16 yrs	16-20	21-49	50-64	65 & over	Total
Male	35	13	55	36	107	246
Female	18	15	49	60	291	433
Total	53	28	104	96	398	679

DEVELOPMENT OF SERVICES FOR OLD PEOPLE

Co-operation was given to the County Welfare Officer in promulgating pilot schemes in six selected areas of the Administrative County, to make an assessment of the social needs of old people in the community, to establish priorities within the welfare services in meeting those needs and also to prepare lists of old people at risk who wish to be included in such lists and to establish machinery, in co-operation with voluntary organisations, for maintaining contact with them so that the resources of both statutory and voluntary services can be made available when required.

These pilot surveys are still proceeding and a full report will not be available until 1971 but they have already confirmed the main ways in which services for old people require the most urgent development, i.e.:-

- (a) a contact service for old people 'at risk' in the community;
- (b) further development of housing suited to the special needs of old people;
- (c) the domiciliary services, both statutory and voluntary - the present deficiencies in which appear to be less formidable than expected; and
- (d) extension of the existing social and recreational facilities.

SECTION VI - THE AMBULANCE SERVICE

All requests for ambulance transport and the control of movement of ambulance vehicles continued to be dealt with by the ambulance control centre, Chelmsford, the staff of the centre being assisted in this work by the transport officers employed at some of the larger hospitals on a joint appointment basis.

The "block booking" system introduced at some hospitals in 1968 has continued in operation and has resulted in ambulance vehicles being used to greater capacity with a consequent reduction in the average number of miles per patient and a more economical service. The advantages of this scheme are considered sufficient to warrant its extension, although a close watch is being kept on the situation as there are indications that some patients are having to wait rather longer than is desirable before being conveyed home in the afternoons after treatment.

Deployment of Vehicles and Staff

There are now 27 ambulance stations used by the directly-provided service, a new one-vehicle station having been opened in Corringham in February. The Harwich station was transferred in December from inadequate hired premises to purpose-built accommodation in Ramsey Road, Dovercourt. In addition, the Brightlingsea Ambulance Committee continues to operate an agency station in that town.

The Joint Committee of the Order of St. John and the British Red Cross continued to provide a hospital car service which is used for conveying some sitting case patients.

Staff and Staff Training

Training facilities for staff continued to be provided at Danbury Park, places being offered to neighbouring authorities in East Anglia. During the year four six-week courses for new entrants and five two-week courses for existing staff having between two and five years service were organised involving a total of 90 students. A high standard of instruction has been maintained and, the County Council having indicated they are prepared to establish a regional training school, it is hoped that an early decision will be made by the Department of Health and Social Security on this matter so that further improvements to the accommodation and curriculum may be undertaken.

Three years ago it was decided to create 18 posts of driver attendant to act as reliefs during periods of sickness and annual holidays. During 1969 it was quite clear that the number of men absent each week represented a serious manpower problem which could not be adequately met by existing

staff. This, coupled with the necessity to cover the duties of staff attending the training school, resulted in a decision being made to appoint a further nine relief driver attendants during the year.

A number of officers of the service have voluntarily given instruction in first aid to some of the voluntary aid detachments which have been formed in the County since the change in national policy for civil defence. In addition, the detachments have been allowed to use the training ground at Danbury Park for practical training sessions.

Vehicles and Equipment

The total number of vehicles has remained unchanged but the policy of replacing earlier diesel-engined vehicles by petrol-engined vehicles continued, 14 such replacements being made during the year. Of these, 8 were dual purpose ambulances and 6 were sitting case vehicles. The latter are of two types to carry either 11 or 14 sitting cases, provision being made so that, where necessary, one stretcher case can be carried.

The experiment introduced in 1967 whereby ambulance vehicles are serviced in accordance with the general recommendations of the manufacturers has so far proved satisfactory and this arrangement is being continued. The scheme is being kept under close review to ensure that no undue breakdowns occur which could be attributable to the less rigid maintenance standards.

To comply with the Road Vehicles (Headlamps) Regulations, arrangements were made to equip all ambulance vehicles with two fog lamps.

Hospitals

The three ambulances previously used specifically for the conveyance of patients to and from their homes and the day hospital at Severalls Hospital, Colchester were replaced by three new Ford Transit sitting case vehicles having a greater seating capacity. This has enabled a reduction to be made in the number of times when other vehicles have had to be used to convey patients to this hospital.

Arrangements continue to exist whereby obstetric flying squads from selected hospitals and the emergency team based at Severalls Hospital can be conveyed if necessary to the homes of patients.

First Aid and Efficiency Competition

Driver Attendants D. A. W. Solly (Basildon) and P. J. O'Sullivan (Harlow) again volunteered to act as a team in the No. 5 Regional Competition of the National Association of Ambulances Officers.

Opportunities for training during duty time were given and in the competition, which took place at the R.A.F. Station, Stanmore, Middlesex on 14th June 1969, they distinguished themselves by taking first place.

They subsequently took part in the National Competition at Harrogate on 3rd August 1969 when they finished fifth out of ten teams, although in the individual driving test they were only beaten by one point with a score of 95 out of 100.

National Safe Driving Competition

Two hundred and fifty nine Driver Attendants were successful in gaining awards in the National Safe Driving Competition organised by the Royal Society for the Prevention of Accidents.

Statistics

The following table shows the miles run and patients conveyed by the directly-provided service, the agency service and the hospital car service:-

	Year	Directly-provided Service	Agency Service	Hospital Car Service	Whole Service
Patients conveyed	1967	361,539	4,379	69,156	435,074
	1968	380,236	4,753	48,259	433,248
	1969	384,220	6,152	44,153	434,525
Mileage	1967	2,571,723	27,092	1,092,977	3,691,792
	1968	2,599,400	26,955	824,536	3,450,891
	1969	2,654,371	29,740	764,763	3,448,874
Average Mileage per Patient	1967	7.1	6.2	15.8	8.5
	1968	6.8	5.7	17.1	8.0
	1969	6.9	4.8	17.3	7.9

There was a slight decrease in the number of emergency cases carried during the year, 25,644 compared with 26,294, but the number of non-emergency cases rose by 1,927 from 406,954 to 408,881.

Conveyance of Patients by Air

On one occasion during the year a service helicopter was used to convey an emergency case in special circumstances from Billericay to Stoke Mandeville Hospital.

Communications

The first stage of a four year programme to replace all the two-way radio equipment in use with the County Ambulance Service was carried out in north-east Essex. Twenty-three new mobile multi-channel transistorised radio-telephone sets, complying with the new 12½ KHz separation specified by the Post Office which will be compulsory for all radio telephone users by 1973/74, were fitted in ambulance vehicles operating in this area and the base transmitter at Shrub End, Colchester suitably modified.

There was no change in the basic system of communication, the control centre being able to communicate directly with all ambulance stations either by telephone or telex and with vehicles by means of radio-telephone.

SECTION VII-MENTAL HEALTH SERVICES

Training Centres

In April 1969 an additional adult training centre was opened bringing the total number of centres for the mentally subnormal in the County (including two administered by the Basildon Urban District Council as Delegatee Authority) to 14. The new centre, known as Dilkes Wood Centre, and situated in South Ockendon, opened with a nominal 112 places and at the end of the year 74 trainees were on the register.

At the request of the Physician Superintendent of South Ockendon Hospital, arrangements were made during the latter part of the year for 16 hospital patients to commence attendance at the Dilkes Wood Centre on a daily basis at the beginning of 1970. It is hoped that this will help forge closer links between the hospital and the mental health service.

As is the case in the other industrial-based centres in Essex, the object is to provide effective training for mentally subnormal persons consisting of formal education, industrial work, and social training and to prepare and encourage those who are suitable for employment in industry. Industrial work carried out at the centre includes the construction of work benches and cabinets for other centres, wheelchair ramps, scenery for the local arts theatre, plant pot stands and table tennis tables, the assembly of brushes and terminal blocks and the painting of plastic toys.

The Harlow Junior Training Centre has been extended by the building of two additional classrooms which has helped to relieve over-crowding and, in particular, has provided extra accommodation for physically handicapped children. The other project in progress at the Harlow Centre is the provision of a heated swimming pool for learners. The first stage was completed in June and the pool was brought into use in July. Work on the second stage - the provision of a clear span cover - was started towards the end of the year and it is hoped that it will be completed early in 1970. As mentioned in my Reports for 1967 and 1968, the pool was made possible through the kindness and efforts of a voluntary organisation known as "Project 67". The pool has already given great encouragement to children learning to swim and pleasure to those who may do little more than enjoy the feeling of freedom in the water.

Work commenced on the erection of a new junior centre at South Benfleet (to replace the temporary Coombe Wood Centre) and on the adaptation of the former Civil Defence Centre at Saffron Walden to provide a comprehensive centre in place of the inadequate hired premises in Hill Street.

Plans were prepared for adult centres at Basildon (where terms were agreed for the purchase of a site) and Chigwell, negotiations were proceeding

for the purchase of a site for an adult centre in Harlow, and a site at Stanway for a sheltered workshop was appropriated.

Physiotherapy at Junior Centres

For some years the Regional Hospital Board has provided the services of a physiotherapist for one session a week at the Harlow Junior Centre. These sessions have proved most helpful to the children and in view of the increasing number of physically handicapped trainees attending junior centres the County Council has engaged the services of a physiotherapist on a sessional basis to visit each junior centre in turn to advise and demonstrate to the staff the type of exercises best suited to the needs of each trainee requiring physiotherapy.

Special Care Units at Junior Centres

Experience has shown that the staffing needs of the special classes for children, who have physical handicaps or behavioural and emotional disorders in addition to their mental handicap, are far greater than in the other classes at junior training centres. In order to meet this need the County Council decided that each room used exclusively for special care cases should have the services of a teacher (assistant supervisor) additional to the normal establishment of teaching staff.

Experiment in Deep Frozen Pre-prepared Meals

As the School Meals Service was unable to provide meals for the Coombe Wood Centre, arrangements were made experimentally for the bulk of the meals at the centre, averaging 17 a day, to consist of deep frozen prepared food on a three weekly cycle of menus. The experiment commenced late in 1968 on the opening of the centre and has continued with success during 1969. The semi-skilled kitchen staff have supplemented these by preparing gravies, sauces, custards, salads and occasional simple dishes and roast potatoes. The meals have proved to be palatable and attractive as well as providing a well-balanced diet. The children eat well and waste is negligible.

There are advantages in using this method of catering at the centre. Semi-skilled staff are able to cope with the provision of meals, menus can be changed, the number of meals varied at short notice without causing inconvenience or waste and supplies of food stuffs are not dependent on the season of the year.

Coombe Wood Centre was the first County Council establishment to have a planned programme of deep frozen pre-prepared meals. The average cost of each meal over the year, including labour and fuel costs, is 4s. 6d. It is considered that the experience gained in this form of catering will prove of great value. Not only has it served to demonstrate the degree of

acceptability of this type of meal but will be of practical value in planning future kitchens, particularly in determining the extent to which orthodox equipment is necessary for the provision of items such as milk puddings and custards to supplement pre-prepared meals.

Social Training and Outings

During the year it was decided to merge the allowances for social training and outings and to abolish the former flat rate allowances in favour of a per capita social training allowance expendable on a termly basis. In addition the scope of the social training programme was broadened to enable centre supervisors and managers to plan programmes ahead and to arrange more adventurous educational visits to include occasional visits to places of interest such as London museums.

Care of Pre-School Children

The pre-school play group which was established in 1966 by the Harlow and District Society for Mentally Handicapped Children continues to flourish. Eight children at present attend the group and the County Council contributes towards transport costs.

A pre-school play group has been formed by the Benfleet and District Society for Mentally Handicapped Children and group sessions for eight mentally handicapped children are held twice weekly at Hadleigh. This has proved a very successful venture.

Contracts

During the year the adult training centres have been successful in obtaining contract work consisting of the assembly of electric plugs, the construction of battery trays, packing plastic toys and the folding and packing of jumble collection bags from various firms and organisations. Negotiations are in hand for a contract for the folding and packing of incontinence pads.

In-Service Course for Training Centre Staff

In-service training is an essential part of the programme for staff training. Three courses were arranged during the year; a physical education course during the spring term; a series of lecture/group discussions during the summer term for staff who had recently joined training centres and, in the autumn term, further lecture/discussion groups for new entrants, general duties assistants and senior instructors and senior assistant supervisors.

Residential Accommodation

The 24-place hostel for mentally subnormal men and women known as Pyefleet Lodge, Braintree was opened in August. At the end of the year there were 21 persons in residence.

Work has started on the second hostel for mentally subnormal children. This is being built at Clacton-on-Sea and will accommodate 12 boys and 8 girls. In accordance with the policy that hostels shall be named after geographical features on the Essex coastline, it will be called Limbourne House.

Table VII on page 88 sets out the occupancy of all the hostels since the first was opened in 1962 from which may be seen the consistency of usage at Conifer Close, which has been fortunate in retaining its original warden since it opened, and also the improved place usage in 1969 at Havengore. Both records are the result of energetic co-ordinated effort by hostel, central administrative and field work staff.

As a result of the re-organisation of local government in Greater London, Westmarsh Lodge, a hostel for mentally subnormal men in Romford, was transferred to the London Borough of Havering in 1965, and 15 beds were retained under a User Agreement for residents from the Administrative County of Essex. At the request of the London Borough, this Agreement will formally terminate early in 1970 and no 'new' Essex admissions will take place. Five of the 15 Essex residents have already been transferred to other accommodation and the remainder will be removed as and when practicable.

The prospect of full-time residential social worker training leading to a formal qualification is welcomed. The staffing position did not allow the release of anyone for the courses beginning in 1969 but it remains to be seen whether this will become possible in 1970.

Fieldwork

By the end of the year, of the 34 mental health social workers employed, 16 were professionally qualified and 7 held the Letter of Recognition. Four trainee social workers were successful in obtaining the Certificate in Social Work and on return to the Department were appointed as mental health social workers. Two social workers and six trainee social workers commenced courses of training in 1969 in order to obtain the Certificate.

Seven progressive grade posts of social worker (health) within the overall establishment were created in April, four being filled during the year. The occupants of these posts will be expected to implement college

counselling, supervision of trainee social workers and the supervision of fieldwork placement of college students in their responsibilities.

Four trainee appointed in the autumn, together with some other new entrants in the Health, Welfare and Children's Departments attended an in-service training course on a one day a week basis.

In three of the five district offices the field work supervision of social work students continued to expand and at the end of the year, the tutors responsible for professional courses at four colleges had requested that similar placements be arranged in 1970. It is expected that the students will be offered the facilities requested.

Existing clerical/typing staff at district offices have a heavy workload, and a modest increase at two offices (a half-time post at each) was achieved in April.

Social work in connection with the sheltered workshop, the hostels (including Pyefleet Lodge) and the Phoenix Group Homes continued and expanded. Student counselling was undertaken at nine colleges of further education and will be introduced at a tenth early in 1970 when a new Principal takes up duties.

A joint social worker appointment in the field of mental subnormality began in October in conjunction with South Ockendon Hospital.

An additional social club was opened at Saffron Walden on the initiative of a social worker, a general medical practitioner and some local volunteers. Work involving social workers with other clubs continued, whilst several workers are involved with groups of clients. In this connection, I regret to record the death of Mr. S. H. Maurice who undertook sterling work with the social club at Loughton, not only after being transferred to the London Borough of Redbridge but after his retirement.

A well attended study day in August will lead to two social work publications, one by the County Council of Essex for resale entitled "Social Work with groups in Essex", the other for insertion in a periodical under the heading "Relationships Need Working At!".

The County Psychiatric Social Worker and an Area Psychiatric Social Worker each presented papers at the Fifth International Conference for Suicide Prevention.

Some of the project groups which began evaluating various aspects of social work in 1968 were near to completion by the end of the year. The number of inter-disciplinary groups was increased from three to eight this winter.

Tables are appended giving details of the number of new cases brought to notice during the year and the number of persons receiving community care at the end of the year indicating the type of mental disorder.

During the year, the mental health social workers were concerned with 295 informal admissions to hospital. They were also involved with the following admissions carried out under the compulsory procedure laid down in the Mental Health Act, 1959:-

	Applications made by Mental Welfare Officers	Applications made by relatives with the assistance of Mental Welfare Officers
Section 25	52	63
Section 26	25	39
Section 29	122	187

Mental Health Act, 1959 - Approval of Medical Practitioners

During the year ten medical practitioners applied and were approved for the purposes of Section 28 of the Mental Health Act, 1959 and at the end of the year there was a total of 86 medical practitioners who had been approved by the County Council.

Essex Show

As a result of interest shown by voluntary organisations in 1968 in combining efforts for a joint exhibit in the Health Department's marquee at the Essex Show, positions were again offered in 1969 and accepted by the National Society for Mentally Handicapped Children, the National Association for Mental Health, Phoenix Group Homes and Alcoholics Anonymous. Items of art and other work carried out at training centres were also on display. From reports received a considerable amount of interest was shown by members of the public.

Liaison Committee for Essex

Members of the County Council's Health and Welfare Committees met representatives of the North East Metropolitan Regional Hospital Board in October to review generally the current arrangements for liaison in the fields of health and welfare and to highlight issues which need co-ordinating action. It was agreed to form a Liaison Committee, consisting of representative of the Board, the National Health Service Executive Council for Essex and the County Council, to be served by a working party of senior officers, to discuss

and make recommendations concerning the planning and co-ordination of services between authorities. This formal link will strengthen the existing informal arrangements for planning and co-ordination. One of the items currently under discussion is the long-term problem of the provision of residential accommodation for the mentally subnormal.

Serious overcrowding and shortage of staff led to an embargo on admissions to both hospitals for the mentally subnormal in Essex (The Royal Eastern Counties Hospital, Colchester and South Ockendon Hospital). This, in turn, resulted in additional demands being made upon the mental health service for support in the home situation, for training centre attendance, particularly at the special care units at junior centres where it has proved necessary to resort to part-time attendance to provide a service for as many as possible of those who need it, and for residential care.

One of the ways of reducing overcrowding in the hospitals would be to discharge patients considered suitable for care in the community, if accommodation were available. Following a review of patients in hospitals for the subnormal, the North-East Metropolitan Regional Hospital Board submitted to the County Council lists of such patients with a request that an indication be given when it might be possible to offer them hostel places.

To accommodate these patients in the community would involve not only additional hostel but also training centre accommodation and the County Council referred the matter to the Liaison Committee for consideration with a view to the submission of recommendations regarding the action to be taken.

Visitors from Sweden

At the instigation of the Department of Health and Social Security, arrangements were made for 31 members of staff from a Swedish Hospital for mentally disordered people to visit hostels and centres in Colchester. The visitors were greatly impressed by all they saw and gifts of items made by mentally handicapped people from Sweden and the Essex establishments were exchanged.

A teacher from Stockholm, Mrs. A. Hedelman also visited the Adult Training Centres at Chelmsford and Colchester.

REPORT OF THE CHIEF DENTAL OFFICER

The full statistical returns are shown on page 41 of the Report.

The general pattern of dental inspection and treatment for expectant and nursing mothers and for pre-school children is remarkably similar to that for the previous year. Attention was drawn in the report for 1968 to the encouraging increase in that year, for the first time in several years, in the number of pre-school children inspected and treated and in 1969 this increase was maintained with 1,395 individual children receiving treatment compared to 1,324 in 1968.

The amount of treatment in all categories fell slightly, for example, the number of fillings decreased by 157, except for prophylaxis (scaling and polishing the teeth) which rose from 176 to 216. The total number of sessions spent on the treatment of young children was slightly lower whilst the number of courses of treatment completed during the year also fell by 196. Slightly more pre-school children received an inspection during the year, 3,245 compared with 3,180 in 1968 and slightly fewer were offered treatment 1,518 compared with 1,587.

It is important that children should receive a dental inspection and any necessary treatment from an early age (2½ to 3 years) in order to prevent more serious dental disease later on. Early detection and prevention, through advice to mothers, are keystones in the control of dental disease in children and it is unfortunate that the small increase during the year of dental staff precluded any expansion of this branch of the dental service without detriment to the treatment needs of school children. The two dental auxiliaries, one in Harlow and one in West Essex, who started during the latter part of the year are the first, it is hoped, of many who in time will be able to help considerably in the treatment of young children.

It will be seen from the statistical returns that the number of expectant and nursing mothers inspected and treated diminished, a tendency occurring in most parts of the country. It is reasonable to suppose that most mothers during and after pregnancy continue to attend their usual dental practitioner and as dental consciousness increases in younger adults this trend to regular treatment will increase and fewer patients who have no regular dentist will wish to avail themselves of the local authority service. It is important that mothers should be able to obtain any necessary treatment for good oral health from whichever branch of the health service they choose.

Staff

The establishment of one Chief Dental Officer, 8 Area Dental Officers and 40 Dental Officers was modified in April by the addition of 8 Dental Auxiliaries, of which, two posts were filled by the end of the year. Lack of

suitable double surgery clinics to enable a Dental Officer and Dental Auxiliary to work together as members of an integrated dental team prevented further appointments of auxiliaries but with extra surgery conversions and the delivery of two mobile dental clinics in 1970, it is hoped to be able to increase the number employed. The number of dental officers in post at 31st December 1969 was the full-time equivalent of 28.2, compared with 27.02 at the end of 1968, for the whole of the Authority's commitments. The staff spent 669 half day sessions on inspection and treatment of mothers and children under 5 and 17 sessions on dental health education work, the total of 686 sessions representing 5.2% of their time.

The staffing position remained uneven with some areas of the County better staffed than others e.g. Colchester and Basildon. However, some much needed improvement took place in the Harlow and Thurrock areas whilst there was a deterioration in the staffing ratio in Mid-Essex.

An appointment was made in January of a whole-time (excluding school holidays) Dental Health Assistant, and this has made possible a significant increase in the amount of dental health teaching in schools. Her duties however include dental health education to mothers at ante-natal and post-natal clinics and to toddlers clinics and this work is considered to be of the greatest value and importance.

Liaison was maintained with other branches of the dental profession through attendance at scientific and local meetings and through membership of various committees. Four Area Dental Officers attended a two-day Post-Graduate Course in London in November and a dental officer attended a two-day dental health education conference held by the General Dental Council in London. The Chief Dental Officer and 2 Area Dental Officers attended the Annual Conference of the British Dental Association in June.

The County Council agreed that the Chief Dental Officer should attend a course of study in London for the Diploma in Dental Public Health in order to assess its value with a view to consideration being given to assist members of the dental staff to obtain this qualification. The Diploma, registered in 1967 with the General Dental Council as an additional qualification, is primarily intended for those concerned with the administration of public health dental services. The course, which started in October and is arranged by the dental schools of the University of London, extends for one academic year and involves the Chief Dental Officer's attendance for 2½ days each week.

Arrangements for monitoring staff concerned with x-rays were repeated during the year and no reports of undue radiation dosage were received.

Premises and Equipment.

The Authority had 39 fixed clinics with one surgery and 8 clinics with 2 or more surgeries, giving a total of 56 surgeries available, of which 53 were in use, although not all on a whole-time basis. Two mobile dental clinics were ordered in November for delivery in 1970 intended for use by dental auxiliaries at clinics possessing only one surgery or for use by dental officers at some of the more remote rural schools. After being closed for several years, it was possible to re-open on a whole-time basis the dental suite at Sydenham House, Harlow, and alterations to provide additional surgery accommodation were in hand at Braintree, Aveley and Stanford-le-Hope Clinics. The new dental suite at Thundersley clinic was brought into use during the year.

In accordance with recommendations made in the Report of a Joint Sub-Committee of the Central Health Services Council entitled "Dental Anaesthetics" (H.M.S.O. 1967) that adequate suction apparatus should be provided in dental surgeries where general anaesthetics are administered, ten electrically operated aspirators were purchased for those clinics where the greatest number of general anaesthetics are carried out. It is proposed to provide such aspirators in all dental surgeries in the course of the next few years.

General anaesthetic apparatus receives regular servicing by the makers to ensure safety and proper working.

Handicapped Children

Every effort is made to provide dental care for children attending special schools maintained by the Authority. As treatment for these children can sometimes be difficult and often time-consuming, a strengthening of the numbers of dental officers would allow more work to be done for these children.

The attention of the dental and medical staff concerned with general anaesthesia was drawn during the year to the possible hazards with patients of African and West Indian descent suffering from sicklecell trait together with the need for routine blood pictures before anaesthesia.

Visit of Inspection by a Dental Officer of the Department of Education and Science

A visit to review the dental services of the Authority was made by Mr. W. G. Everett, a Dental Officer of the Department of Education and Science on four days during April. A letter dated 23rd October 1969 raising a number of points was received from the Department including the following:-

"It was noted that the number of children inspected at school had decreased 8% in the period 1966 - 1968 and that the output of clinical work per dental officer was 10% below the national average.

The staffing ratio of children to each dental officer was slightly less favourable than the national average and it was hoped the introduction of dental auxiliaries will help with the treatment of very young children. It was suggested that the Authority might consider the appointment of an orthodontist.

The maintenance of a well-established programme of dental health education was noted and the Authority's contribution in this field commended.

The increase in the amount of treatment given to maternity and child welfare patients was noted and the Authority's intention to develop this service with the help of dental auxiliaries commended. It was suggested that a three year old birthday card dental reminder scheme might be considered.

The Authority's decision to utilise mobile dental clinics is welcomed and the standard of dental surgery accommodation and equipment was considered generally satisfactory."

The matters eliciting adverse comment in the Department's letter were receiving the necessary attention both before and after the receipt of the report which has been discussed in detail by the appropriate Committees of the County Council.

Dental Health Education

It was possible, with the appointment of a Dental Health Assistant, to expand considerably the number of schools and clinics visited during the year. Dental health education is considered to be an integral part of the work of the dental staff and all methods of prevention of dental disease are constantly being presented to children and their parents. The two dental auxiliaries in post also spend a small proportion of their time to education and are encouraged to design posters and slogans. The difficulty remains of reaching those who are quite uninterested in dental health and it is proposed to run a pilot scheme with 3 year old birthday card reminders to assess its worth for possible use on a bigger scale.

General Observations

The paramount need of the Authority's dental service is additional manpower. The fact must be faced however that there is an overall national shortage of dentists and that it is unrealistic to hope for dramatic

improvement. The employment of ancillary staff, i.e. auxiliaries and assistants to reinforce and assist the dental officer in the more efficient and better use of his time is extremely important. Increased treatment facilities, however, must go hand in hand with skilful and considerate handling. The way in which children receive treatment can so easily influence their subsequent attitude to dental care.

At the present time, fluoridation of the water supplies is undoubtedly the best method of reducing dental decay and it is to be regretted that all Essex children are still not receiving this benefit, largely due to the current difficult economic situation.

Rumour and speculation concerning the future pattern of the Health Services are not helping local authorities in their recruitment of dental officers nor, indeed, in the retention of present staff.

John Timmis

TABLE 1 - POPULATION, BIRTHS, DEATHS, AND ANNUAL RATES, 1969

Health Area and County District	Estimated Mid-year population		Estimated Net Migration	Live Births		Deaths		Infant Deaths		Stillbirths	Deaths under 1 week	Perinatal Mortality Rate†
	1968	1969		No.	Rate*	No.	Rate*	No.	Rate†			
Harwich B.	14,780	14,870	12	241	16.2	163	11.0	2	8	6	1	28
Brightlingsea U.	5,990	6,150	176	94	15.3	110	17.9	-	-	-	-	-
Clacton U.	35,130	35,730	939	394	11.0	733	20.5	4	10	8	2	25
Frinton and Walton U.	11,920	12,060	262	125	10.4	247	20.5	1	8	1	-	8
Halstead U.	6,920	7,050	126	106	15.0	102	14.5	3	28	1	3	37
West Mersea U.	3,740	3,840	116	48	12.5	64	16.7	1	21	1	1	41
Wivenhoe U.	4,300	4,420	86	77	17.4	43	9.7	2	26	-	-	-
Halstead R.	17,930	18,150	114	325	17.9	219	12.1	4	12	2	1	9
Lexden and Winstree R.	27,920	28,360	272	525	18.5	357	12.6	12	23	10	8	34
Tendring R.	27,570	28,100	477	465	16.5	412	14.7	6	13	6	5	23
NORTH-EAST ESSEX	156,200	158,730	2,580	2,400	15.1	2,450	15.4	35	15	35	21	23
Chelmsford B.	56,090	56,900	131	1,166	20.5	487	8.6	20	17	7	12	16
Maldon B.	12,640	12,920	243	239	18.5	202	15.6	1	4	2	1	12
Braintree and Bocking U.	22,950	23,380	227	508	21.7	305	13.0	5	10	4	3	14
Brentwood U.	57,650	58,250	425	874	15.0	699	12.0	9	10	14	3	19
Burnham-on-Crouch U.	4,450	4,510	52	61	13.5	53	11.8	-	-	-	-	-
Witham U.	12,750	13,080	138	312	23.9	120	9.2	3	10	5	2	22
Braintree R.	24,770	25,120	214	408	16.2	272	10.8	7	17	3	4	17
Chelmsford R.	62,920	64,730	1,253	1,217	18.8	660	10.2	9	7	15	4	15
Maldon R.	19,090	19,580	302	390	19.9	202	10.3	6	15	6	3	23
MID-ESSEX	273,310	278,470	2,985	5,175	18.6	3,000	10.8	60	12	56	32	17
Benfleet U.	45,540	46,270	353	864	18.7	487	10.5	9	10	13	7	23
Canvey Island U.	23,370	24,420	789	538	22.0	277	11.3	8	15	13	7	36
Rayleigh U.	25,610	25,920	151	389	15.0	231	8.9	3	8	7	2	23
Rochford R.	38,910	39,290	99	838	21.3	557	14.2	12	14	3	8	13
SOUTH-EAST ESSEX	133,430	135,900	1,392	2,629	19.3	1,552	11.4	32	12	36	24	23
Saffron Walden B.	9,930	10,030	70	173	17.2	143	14.3	-	-	1	-	6
Chigwell U.	56,350	56,030	-354	554	9.9	520	9.3	4	7	10	2	21
Epping U.	11,280	11,380	53	167	14.7	120	10.5	1	6	2	1	18
Waltham Holy Cross U.	13,140	13,670	320	307	22.5	97	7.1	-	-	5	-	16
Dunmow R.	23,490	23,510	-127	383	16.3	236	10.0	5	13	4	3	18
Epping and Ongar R.	43,560	43,340	-558	696	16.1	358	8.3	11	16	10	5	21
Saffron Walden R.	19,740	19,880	5	343	17.3	208	10.5	3	9	4	1	14
WEST ESSEX	177,490	177,840	-591	2,623	14.7	1,682	9.5	24	9	36	12	18
HARLOW U.	74,110	76,240	1,006	1,484	19.5	360	4.7	22	15	14	14	19
THURROCK U.	123,230	124,830	444	2,134	17.1	978	7.8	44	21	21	25	21
BASILDON U.	119,470	122,760	1,853	2,332	19.0	895	7.3	32	14	20	19	17
COLCHESTER B.	72,630	75,210	2,075	1,392	18.5	887	11.8	22	16	10	13	16
ADMINISTRATIVE COUNTY	-	1,149,980	11,744	20,169	17.5	11,804	10.3	271	13.4	228	160	19.0
Administrative County, 1968	1,129,870	-	18,324	20,246	17.9	11,550	10.2	295	14.6	248	174	20.6

* per 1000 estimated population

† per 1000 live births

+ per 1000 total births

TABLE II – CAUSES OF DEATH BY AGE, 1969

B. List Number	Cause of Death	Males									Females								
		0-	15-	25-	35-	45-	55-	65-	75-	Total	0-	15-	25-	35-	45-	55-	65-	75-	Total
5,6	Tuberculosis	1	-	-	-	2	1	8	6	18	-	-	-	-	-	1	4	2	7
1-4,7-18	Other infective and parasitic diseases	11	1	-	-	3	3	1	2	21	14	2	1	-	2	2	1	4	26
19(1)	Malignant neoplasm, buccalcavity and pharynx	-	-	-	2	1	5	3	7	18	-	-	-	2	1	-	3	4	10
19(2)	Malignant neoplasm, oesophagus	-	-	-	-	1	5	7	6	19	-	-	-	-	2	5	4	9	20
19(3)	Malignant neoplasm, stomach	-	-	-	3	13	43	58	42	159	-	-	1	2	7	22	20	58	110
19(4)	Malignant neoplasm, intestine	-	-	2	5	9	35	55	56	162	-	-	1	2	10	29	54	75	171
19(5)	Malignant neoplasm, larynx	-	-	-	1	-	2	5	3	11	-	-	-	-	-	-	1	1	2
19(6)	Malignant neoplasm, lung and bronchus	-	-	-	5	45	167	206	92	515	-	-	1	4	11	29	43	16	104
19(7)	Malignant neoplasm, breast	-	-	-	-	-	-	2	-	2	-	-	2	19	38	60	64	60	243
19(8)	Malignant neoplasm, uterus	-	-	-	-	-	-	-	-	-	-	-	1	4	14	14	23	16	72
19(9)	Malignant neoplasm, prostate	-	-	-	-	3	8	28	60	99	-	-	-	-	-	-	-	-	-
19(10)	Leukaemia	5	6	5	-	4	6	15	10	51	3	-	2	1	3	7	7	9	32
19(11)	Other malignant (incl. lymphatic etc.) neoplasms	5	4	8	18	43	92	87	56	313	4	4	4	26	25	86	87	94	330
20	Benign neoplasms and neoplasms of unspecified nature	2	-	-	2	3	5	6	-	18	-	-	-	1	2	3	1	11	18
21	Diabetes Mellitus	-	-	1	3	6	10	11	15	46	-	1	-	-	3	8	16	47	75
22,46(1)	Other endocrine, nutritional & metabolic diseases	5	-	-	-	1	2	3	2	13	5	-	-	2	1	4	4	6	22
23,46(2)	Diseases of blood and blood forming organs	-	-	1	-	1	2	4	6	14	-	-	-	4	-	-	5	10	19
46(3)	Mental disorders	1	-	-	-	1	1	5	5	13	-	-	-	-	-	-	-	-	-
24,46(4)	Diseases of the nervous system and sense organs	9	5	2	3	4	9	17	22	71	5	5	1	4	9	9	20	31	84
26	Chronic rheumatic heart disease	-	-	1	4	7	7	8	11	38	-	-	-	3	14	29	29	33	108
27	Hypertensive disease	-	-	1	2	1	12	33	25	74	-	-	-	1	4	6	35	70	116
28	Ischaemic heart disease	-	-	7	34	145	372	537	514	1609	-	1	-	4	20	108	317	742	1192
29	Other forms of heart disease	2	-	2	1	4	21	42	146	218	-	-	-	-	7	14	48	216	285
30	Cerebro-Vascular disease	-	2	1	9	25	82	200	396	715	1	1	1	10	23	63	159	771	1029
25,46(5)	Other diseases of circulatory system	-	-	-	2	8	22	72	125	229	-	-	-	3	6	16	54	186	265
31	Influenza	-	2	2	1	4	10	25	17	61	-	2	-	-	3	2	34	23	64
32	Pneumonia	26	2	2	2	10	35	88	283	448	18	1	-	-	3	26	62	348	458
33(1)	Bronchitis, emphysema	-	-	-	2	17	65	166	171	421	1	-	-	3	3	17	40	55	119
33(2)	Asthma	1	1	1	2	-	2	4	2	13	-	1	-	1	6	5	3	2	18
46(6)	Other diseases of the respiratory system	19	-	-	-	4	10	15	20	68	6	-	1	-	4	6	10	17	44
34	Peptic Ulcer	-	-	-	-	2	8	16	28	54	-	-	-	2	2	7	7	21	39
36	Intestinal obstruction and hernia	2	-	-	-	1	2	8	9	22	-	1	-	-	1	4	4	20	30
35,37,46(7)	Other diseases of the digestive system	2	1	1	4	4	13	16	19	60	1	2	2	1	4	15	19	40	84
38	Nephritis and Nephrosis	-	-	2	3	4	9	8	28	-	-	-	2	1	1	5	6	6	21
39	Hyperplasia of prostate	-	-	-	-	-	2	5	29	36	-	-	-	-	-	-	-	-	-
46(8)	Other diseases of the genito-urinary system	-	-	-	-	2	4	11	18	35	-	1	1	1	-	7	12	30	52
40,41	Complications of pregnancy, childbirth and puerperium	-	-	-	-	-	-	-	-	-	-	2	1	2	-	-	-	-	5
46(9)	Diseases of the skin and subcutaneous tissue	-	-	-	-	-	2	1	2	5	-	-	-	-	-	1	-	3	4
46(10)	Diseases of the musculo-skeletal system etc.	-	-	-	-	-	4	5	4	13	-	-	-	-	-	5	11	24	40
42	Congenital anomalies	37	2	1	1	2	2	3	1	49	35	2	-	2	3	2	3	-	47
43,44	Certain causes of perinatal mortality	78	-	-	-	-	-	-	-	78	49	-	-	-	-	-	-	-	49
45	Symptoms and ill defined conditions	1	-	-	-	-	1	2	22	26	-	-	-	1	1	-	1	54	57
47	Motor vehicle accidents	10	21	14	9	9	21	11	10	105	4	7	8	2	2	4	8	5	40
48	All other accidents	20	15	7	8	4	9	9	23	95	7	1	-	1	8	5	14	84	120
49	Suicide and self inflicted injuries	-	4	5	7	7	8	3	4	38	-	1	1	7	6	10	5	2	32
50	All other external causes	-	2	2	1	-	3	-	-	8	2	-	2	-	1	1	3	-	9
ALL CAUSES		237	68	68	133	399	1117	1810	2277	6109	155	35	33	116	251	637	1245	3223	5695

DEATHS FROM B LIST CAUSES NOT SHOWN SEPARATELY ABOVE

B.1	Cholera	0	B.9	Whooping cough	0	B.22	Avitaminosis and other nutritional deficiency	3
B.2	Typhoid fever	0	B.10	Streptococcal sore throat and scarlet fever	0	B.23	Anaemias	27
B.3	Bacillary Dysentery and amoebiasis	0	B.11	Meningococcal infection	3	B.24	Meningitis	12
B.4	Enteritis and other diarrhoeal diseases	24	B.12	Acute poliomyelitis	0	B.25	Active rheumatic fever	0
B.5	Tuberculosis of respiratory system	14	B.13	Smallpox	0	B.35	Appendicitis	10
B.6	Other tuberculosis, incl. late effects	11	B.14	Measles	2	B.37	Cirrhosis of liver	21
B.7	Plague	0	B.15	Typhus and other rickettsiosis	0	B.40	Abortion	0
B.8	Diphtheria	0	B.16	Malaria	0	B.43	Birth injury, difficult labour and other anoxic and hypoxic conditions	55
			B.17	Syphilis and its sequelae	1			

TABLE III - PRINCIPAL CAUSES OF DEATH IN HEALTH AREAS AND COUNTY DISTRICTS, 1969

Health Area and County District	Tuberculosis	Malignant neoplasm, stomach	Malignant neoplasm, intestine	Malignant neoplasm, lung, bronchus	Malignant neoplasm, breast	Malignant neoplasm, uterus	Malignant neoplasm, prostate	Leukaemia	Other malignant (incl. lymphatic etc) neoplasms	Diabetes mellitus	Chronic rheumatic heart disease	Hypertensive disease	Ischaemic heart disease	Other forms of heart disease	Cerebro-Vascular disease	Other diseases of circulatory system*	Influenza	Pneumonia	Bronchitis, emphysema	Asthma	Other diseases of respiratory system	Peptic ulcer	Intestinal obstruction and hernia	Nephritis and nephrosis	Hyperplasia of prostate	Congenital anomalies	Birth injury, difficult labour etc.	Motor vehicle accidents	All other accidents	Suicide and self inflicted injury	All other causes	All causes
Harwich B.	-	8	3	8	3	1	2	1	12	3	2	3	39	9	28	5	1	7	4	-	1	2	1	-	-	2	-	-	4	2	12	163
Brightlingsea U.	-	-	4	5	4	-	-	1	2	7	-	-	1	30	7	22	3	1	5	8	-	1	1	-	-	-	-	-	-	-	5	110
Clacton U.	-	19	25	25	15	3	3	6	48	6	5	11	174	64	122	38	4	47	30	1	3	5	3	4	4	3	-	3	10	3	49	733
Frinton and Walton U.	1	2	7	8	4	1	2	-	11	5	2	4	71	14	52	11	6	10	12	2	1	1	2	1	4	1	-	-	-	-	9	247
Halstead U.	-	2	1	7	2	2	2	1	1	-	-	1	17	7	26	6	1	6	1	-	1	2	1	-	-	-	-	-	3	-	11	102
West Mersea U.	-	1	3	3	2	1	-	1	5	-	1	1	15	4	8	3	4	4	1	-	-	-	1	1	1	-	-	-	-	-	3	64
Wivenhoe U.	-	1	-	2	-	-	-	1	4	-	-	2	5	2	9	3	-	2	5	-	-	-	-	-	-	2	-	-	2	1	2	43
Halstead R.	1	3	8	12	4	-	-	5	11	3	1	2	54	10	43	5	2	15	8	-	1	2	-	1	-	-	-	3	4	-	21	219
Lexden and Winstree R.	2	4	5	12	12	1	2	2	15	5	3	10	69	30	53	12	5	33	7	1	3	4	-	1	1	3	-	4	10	3	45	357
Tendring R.	-	5	7	20	2	2	1	-	20	8	7	8	69	35	97	18	5	30	14	3	1	4	-	4	1	2	2	10	9	2	26	412
NORTH-EAST ESSEX	4	45	63	102	48	11	13	19	134	30	21	43	543	182	460	104	29	159	90	7	12	21	8	12	11	14	2	21	48	11	183	2450
Chelmsford B.	1	11	21	25	13	3	10	2	32	9	11	13	118	9	49	24	4	27	25	1	4	5	2	2	-	4	2	6	7	3	44	487
Maldon B.	-	7	11	13	3	1	2	-	5	1	-	2	54	4	38	6	1	16	6	-	3	2	-	-	-	-	-	1	2	3	21	202
Braintree and Bocking U.	1	10	7	19	4	-	3	3	14	3	4	4	61	9	36	17	4	40	16	2	1	3	2	1	2	2	1	8	4	1	23	305
Brentwood U.	2	9	16	30	16	4	5	9	24	1	5	6	215	23	91	29	6	68	39	3	9	5	3	3	3	5	2	7	18	1	42	699
Burnham-on-Crouch U.	1	-	1	4	1	-	-	-	9	-	2	-	15	2	8	2	-	3	-	-	-	-	-	-	-	-	-	1	1	-	3	53
Witham U.	-	4	3	2	4	-	2	2	6	1	1	2	23	3	15	4	1	17	12	-	1	-	-	1	-	2	-	1	4	1	8	120
Braintree R.	1	4	11	14	4	1	5	-	15	4	4	5	58	15	35	14	3	24	18	-	1	1	1	2	-	2	-	3	5	3	19	272
Chelmsford R.	2	12	21	32	18	3	9	5	42	8	5	12	154	24	92	28	2	72	21	1	7	5	1	1	7	5	2	10	11	3	45	660
Maldon R.	-	9	8	14	2	3	-	3	27	1	4	2	45	6	25	7	-	16	7	-	1	1	-	-	-	1	2	2	3	1	12	202
MID-ESSEX	8	66	99	153	65	15	36	24	174	28	36	46	743	95	389	131	21	283	144	7	27	22	9	10	12	21	9	39	55	16	217	3000
Benfleet U.	1	11	9	19	10	2	2	4	39	4	3	5	112	25	86	16	9	19	26	1	7	7	2	2	1	3	1	4	9	7	41	487
Canvey Island U.	-	12	6	17	4	2	4	2	19	2	6	2	67	11	43	9	2	13	17	-	6	1	4	1	-	2	1	1	8	-	15	277
Rayleigh U.	2	3	7	11	11	1	2	-	10	5	1	5	66	6	46	10	2	11	6	1	2	3	2	1	1	2	-	2	1	3	8	231
Rochford R.	1	13	10	31	10	1	5	4	28	3	8	10	107	13	186	20	1	25	17	1	8	2	3	-	1	2	5	2	4	4	32	557
SOUTH-EAST ESSEX	4	39	32	78	35	6	13	10	96	14	18	22	352	55	361	55	14	68	66	3	23	13	11	4	3	9	7	9	22	14	96	1552
Saffron Walden B.	-	1	4	6	1	-	2	5	2	3	1	39	2	16	6	1	26	11	1	-	3	1	-	-	-	-	1	5	-	6	143	
Chigwell U.	1	15	15	36	12	6	3	5	47	6	11	9	113	21	60	15	4	39	34	1	5	3	6	4	1	4	2	6	6	5	25	520
Epping U.	-	1	3	6	2	2	1	1	7	1	1	-	31	2	8	9	2	13	10	-	1	3	2	1	1	1	-	1	2	-	8	120
Waltham Holy Cross U.	-	1	2	2	4	1	2	1	10	2	1	5	29	1	7	1	1	7	5	1	1	3	-	3	-	-	-	1	3	-	3	97
Dunmow R.	-	4	6	14	5	2	2	1	13	3	3	5	50	6	29	22	5	18	8	1	2	5	-	1	-	2	2	3	6	1	19	236
Epping and Ongar R.	-	14	11	23	9	3	7	4	24	1	7	4	83	18	28	14	4	33	16	2	4	1	1	2	3	5	3	8	5	-	21	358
Saffron Walden R.	-	4	9	9	2	4	1	1	12	4	6	3	49	6	30	13	1	22	6	-	1	-	2	-	-	3	-	6	6	1	7	208
WEST ESSEX	1	40	50	96	35	18	16	15	118	19	32	25	394	56	178	80	18	158	90	6	14	18	12	11	5	15	7	26	33	7	89	1682
HARLOW U.	1	6	11	27	8	5	2	2	31	3	8	1	82	12	26	14	2	25	9	1	2	2	4	1	1	9	8	10	6	6	35	360
THURROCK U.	1	23	24	59	19	8	7	7	55	8	10	17	247	38	96	41	9	65	72	2	19	9	-	3	2	11	9	17	24	6	70	978
BASILDON U.	4	30	28	70	21	5	5	3	59	10	15	20	223	21	118	32	4	56	37	4	13	4	3	4	1	8	8	19	6	4	60	895
COLCHESTER B.	2	20	26	34	14	4	7	3	56	9	6	16	217	44	116	37	28	92	32	1	2	4	5	4	1	9	5	4	21	6	62	887
ADMINISTRATIVE COUNTY	25	269	333	619	245	72	99	83	723	121	146	190	2801	503	1744	494	125	906	540	31	112	93	52	49	36	96	55	145	215	70	812	11804
Administrative County 1968	26	247	-	579	235	75	-	64	97	120	179	2780	602	1634	419	199	919	505	30	141	96	61	40	48	104	63	136	183	91	747	11550	

*including active rheumatic fever

TABLE IV - DEATHS BY AGE IN HEALTH AREAS AND COUNTY DISTRICTS, 1969

Health Area and County District	MALES													FEMALES													GRAND TOTAL
	Under 4 wks	4 wks - 1 yr	1-	5-	15-	25-	35-	45-	55-	65-	75-	All ages	Under 4 wks	4wks - 1 yr	1-	5-	15-	25-	35-	45-	55-	65-	75-	All ages			
Harwich B.	-	-	-	-	1	1	2	6	18	26	26	80	1	1	-	1	-	-	3	6	10	9	52	83	163		
Brightlingsea U.	-	-	1	-	1	-	1	3	9	14	26	55	-	-	2	-	-	1	-	2	5	20	25	55	110		
Clacton U.	3	-	-	1	2	3	6	4	54	154	383	-	1	-	-	-	1	-	3	8	30	98	209	350	733		
Frinton and Walton U.	1	-	1	-	-	-	2	1	12	46	60	123	-	-	-	-	1	-	2	2	9	30	80	124	247		
Halstead U.	1	-	-	-	-	-	-	3	8	16	23	51	2	-	-	1	-	-	-	2	6	12	28	51	102		
West Mersea U.	1	-	-	-	-	-	-	-	1	3	11	13	29	-	-	-	-	-	-	-	2	3	5	25	35	64	
Wivenhoe U.	1	1	-	-	-	-	-	4	1	11	14	32	-	-	-	-	-	-	-	-	1	4	6	11	43		
Halstead R.	-	1	1	2	-	-	2	6	25	29	49	115	1	2	1	-	-	-	1	3	11	22	63	104	219		
Lexden and Winstree R.	5	4	-	-	1	2	2	7	29	54	72	176	3	-	-	1	-	1	3	7	22	31	113	181	357		
Tendring R.	6	-	2	-	4	3	6	8	38	64	101	232	-	-	-	1	1	1	5	8	17	49	98	180	412		
NORTH-EAST ESSEX	18	6	5	3	9	9	21	43	197	425	540	1276	7	4	3	4	3	3	17	40	114	280	699	1174	2450		
Chelmsford B.	7	3	2	2	4	2	4	22	52	85	95	278	9	1	-	1	-	-	7	12	24	36	119	209	487		
Maldon B.	1	-	-	1	-	-	-	5	20	28	55	110	-	-	-	-	-	-	-	-	-	-	-	-	-		
Braintree and Bocking U.	3	-	-	1	-	5	1	9	26	62	64	171	2	-	-	-	-	1	-	3	7	18	63	92	202		
Brentwood U.	1	1	2	1	7	3	6	13	66	82	120	302	4	-	-	-	3	2	1	4	14	27	81	134	305		
Burnham-on-Crouch	-	-	-	-	-	-	1	1	5	9	12	28	-	3	-	-	1	1	5	12	43	74	254	397	699		
Witham U.	1	1	-	-	-	-	1	7	11	22	29	72	1	-	-	-	-	-	-	-	5	5	15	25	53		
Braintree R.	1	2	1	-	-	3	6	11	16	48	68	156	4	-	-	1	-	-	2	6	5	6	27	48	120		
Chelmsford R.	3	2	1	6	2	7	3	23	54	91	133	325	2	-	-	-	1	-	1	2	12	32	64	116	272		
Maldon R.	2	1	2	-	-	1	3	8	14	24	50	105	2	2	1	-	-	1	2	8	12	32	65	210	335	660	
MID-ESSEX	19	10	8	11	13	21	25	99	264	451	626	1547	24	7	2	2	6	6	25	59	151	287	884	1453	3000		
Benfleet U.	2	-	1	2	4	3	5	12	38	69	89	225	5	2	2	1	2	1	4	14	22	63	146	262	487		
Canvey Island U.	2	-	1	2	1	2	2	6	20	53	61	150	5	1	1	-	1	1	3	10	17	25	63	127	277		
Rayleigh U.	2	1	-	1	1	1	5	6	19	37	47	120	-	-	-	1	1	2	6	5	16	24	56	111	231		
Rochford R.	9	1	1	1	3	4	5	11	34	82	106	257	1	1	2	-	-	-	3	9	20	55	209	300	557		
SOUTH-EAST ESSEX	15	2	3	6	9	10	17	35	111	241	303	752	11	4	5	2	4	4	16	38	75	167	474	800	1552		
Saffron Walden B.	-	-	1	-	-	-	1	2	11	15	42	72	-	-	-	-	1	-	1	2	5	14	48	71	143		
Chigwell U.	2	1	1	-	5	3	4	25	78	60	87	266	-	1	-	3	2	1	7	18	39	53	130	254	520		
Epping U.	1	-	2	1	-	-	1	4	12	16	27	64	-	-	1	-	1	1	1	6	8	9	29	56	120		
Waltham Holy Cross U.	-	-	-	-	1	1	2	3	17	15	16	55	-	-	-	-	-	-	1	1	11	11	18	42	97		
Dunmow R.	3	-	-	-	-	-	3	9	18	42	49	124	-	2	-	1	1	-	5	5	14	23	61	112	236		
Epping and Ongar R.	3	3	2	-	3	2	3	15	47	47	71	196	2	3	-	-	-	1	-	14	27	37	78	162	358		
Saffron Walden R.	1	1	3	-	1	1	1	7	20	25	53	113	-	1	1	-	1	1	4	1	10	26	50	95	208		
WEST ESSEX	10	5	9	1	10	7	15	65	203	220	345	890	2	7	2	4	6	4	19	47	114	173	414	792	1682		
HARLOW U.	9	4	-	5	5	7	11	26	43	53	40	203	7	2	3	2	1	4	8	12	18	29	71	157	360		
THURROCK U.	21	7	5	5	9	4	16	54	113	170	145	549	11	5	2	-	3	3	17	20	58	113	197	429	978		
BASILDON U.	13	7	5	4	5	4	18	44	103	116	148	467	10	2	4	-	4	4	7	19	58	89	231	428	895		
COLCHESTER B.	9	2	4	6	8	6	10	33	83	134	130	425	7	4	4	2	8	5	7	16	49	107	253	462	887		
ADMINISTRATIVE COUNTY	114	43	39	41	68	68	133	399	1117	1810	2277	6109	79	35	25	16	35	33	116	251	637	1245	3223	5695	11804		
Administrative County	1968	119	52	35	35	75	64	131	376	980	1735	2251	5853	81	43	19	24	22	32	95	244	559	1278	3300	5697	11550	
	1967	144	60	27	37	80	51	142	403	929	1574	2022	5469	92	41	25	19	36	28	113	277	550	1204	2868	5253	10722	
	1966	123	52	32	31	90	59	149	381	994	1597	2007	5515	93	35	23	26	22	41	94	236	503	1163	2871	5107	10622	
	1965	140	60	43	40	71	54	132	389	930	1533	2075	5467	94	49	25	17	28	41	108	226	518	1129	2792	5027	10494	

TABLE V – INFECTIOUS AND OTHER NOTIFIABLE DISEASES, 1969

	Scarlet Fever	Whooping Cough	Measles	Tuberculosis, respiratory	Tuberculosis, meninges and C.N.S.	Tuberculosis, other	Acute meningitis	Dysentery	Food Poisoning	Infectious jaundice	Others+	Total
Harwich B.	2	-	7	3	-	1	-	-	-	-	-	13
Brightlingsea U.	4	-	5	-	-	-	-	-	-	-	-	9
Clacton U.	-	1	18	4	-	-	-	-	1	7	-	31
Frinton and Walton U.	-	1	13	-	-	1	-	-	1	-	-	16
Halstead U.	1	-	4	-	-	1	-	-	-	-	-	6
West Mersea U.	-	-	1	-	-	-	-	-	-	-	-	1
Wivenhoe U.	-	-	5	-	-	-	-	-	-	-	-	5
Halstead R.	17	-	38	2	-	1	-	-	-	-	-	58
Lexden and Winstree R.	13	-	26	4	-	-	-	3	-	12	1	59
Tendring R.	13	-	13	3	-	-	1	-	4	12	-	46
NORTH-EAST ESSEX	50	2	130	16	-	4	1	3	6	31	1	244
Chelmsford B.	43	5	52	2	-	-	-	31	3	16	1	153
Maldon B.	-	20	4	1	-	-	-	-	1	20	1	47
Braintree and Bocking U.	13	1	8	2	-	1	-	-	4	2	-	31
Brentwood U.	20	5	280	4	-	4	-	7	53	9	2	384
Burnham-on-Crouch U.	-	1	1	3	-	-	-	-	-	-	-	5
Witham U.	-	-	45	-	-	-	-	3	-	1	-	49
Braintree R.	3	-	123	2	-	-	-	5	-	-	-	133
Chelmsford R.	25	9	134	5	-	-	-	9	3	6	2	193
Maldon R.	7	95	26	1	-	-	1	-	-	2	-	132
MID-ESSEX	111	136	673	20	-	5	1	55	64	56	6	1127
Benfleet U.	9	1	76	5	1	1	-	101	8	9	1	212
Canvey Island U.	14	4	269	6	-	-	-	17	19	3	1	333
Rayleigh U.	6	1	4	7	-	-	-	91	-	2	-	111
Rochford R.	58	2	94	3	-	4	1	75	12	9	1	259
SOUTH-EAST ESSEX	87	8	443	21	1	5	1	284	39	23	3	915
Saffron Walden B	5	-	3	1	-	1	-	1	2	-	-	13
Chigwell U.	11	13	200	5	-	1	1	11	7	1	1	251
Epping U.	8	-	145	3	-	-	-	-	-	2	-	158
Waltham Holy Cross U.	1	-	57	1	-	1	1	2	1	3	-	67
Dunmow R.	-	-	125	2	-	1	-	-	2	2	-	132
Epping and Ongar R.	16	12	166	6	1	2	-	6	5	8	2	224
Saffron Walden R.	13	2	91	1	-	-	-	23	-	11	-	141
WEST ESSEX	54	27	787	19	1	6	2	43	17	27	3	986
HARLOW U.	85	13	1,682	15	-	1	1	6	3	24	-	1,830
THURROCK U.	37	5	307	22	-	2	2	21	77	82	3	558
BASILDON U.	80	4	428	9	-	1	1	30	8	10	1	572
COLCHESTER B.	44	11	93	5	-	1	1	40	1	119	2	317
ADMINISTRATIVE COUNTY	548	206	4,543	127	2	25	10	482	215	372	19	6,549

Typhoid fever 3, paratyphoid fever 4, acute encephalitis (infective) 2, acute encephalitis (post infectious) 4, ophthalmia neonatorum 3, malaria 2, leptospirosis 1.

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RURAL HOUSING

**TABLE VI – NUMBER OF HOUSES ERECTED DURING 1969 AND
THE NUMBER OF APPLICANTS REMAINING ON WAITING LISTS**

Rural District Council (1)	No. of Dwelling Houses erected during the year ended 31st December 1969		No. of applicants on waiting list for Council houses at 31st December 1969 who are in urgent need of housing accommodation (4)
	By the Council (2)	By Private Enterprise (3)	
Braintree	18 (7)	241 (224)	100 (100)
Chelmsford	248 (138)	647 (887)	353 (481 (Est.))
Dunmow	65 (7)	57 (53)	300 (306)
Epping and Ongar	96 (104)	184 (333)	230 (250)
Halstead	21 (12)	51 (76)	107 (110)
Lexden and Winstree	80 (21)	250 (226)	150 (132)
Maldon	22 (24)	232 (273)	10 (12)
Rochford	65 (5)	99 (233)	125 (91)
Saffron Walden	41 (36)	75 (70)	128 (166)
Tendring	42 (16)	313 (332)	301 (303)
TOTALS	698 (370)	2,149 (2,707)	1,804 (1,951)

1968 figures given in parentheses

Figures include flats in some cases

TABLE VII HOSTELS - ADMISSIONS AND DISCHARGES

Hostel	Category	No. of Beds.		1962	1963	1964	1965	1966	1967	1968	1969	Total	No. residents at 31.12.69.
Holliswell Lodge	Mentally Subnormal Children	22	Admissions	(November) 7	14	9	9	14	6	4	3	66	21
			Discharges	-	4	5	10	17	6	3	-	45	
Conifer Close	Mentally Ill	8	Admissions	(December) 6	20	24	10	16	10	15	10	111	7
			Discharges	1	18	25	10	14	12	11	13	104	
Eastwick House	Mentally Subnormal Women	29	Admissions	-	(October) 19	22	6	6	1	2	2	58	28
			Discharges	-	4	10	6	4	-	3	3	30	
Havengore	Mentally Ill	24	Admissions	-	-	(December) 12	40	29	39	37	53	210	22
			Discharges	-	-	-	32	27	47	30	52	188	
Pyefleet Lodge	Mentally Subnormal Adults	24	Admissions	-	-	-	-	-	-	-	(August) 22	22	21
			Discharges	-	-	-	-	-	-	-	1	1	

TABLE VIII — NUMBER OF PERSONS REFERRED DURING YEAR ENDED 31st DECEMBER 1969

Referred by	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total	
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over			
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F		
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)		(17)
(a) General practitioner	-	-	19	26	-	-	-	-	-	-	3	1	3	1	-	-	53	
(b) Hospitals, on discharge from in-patient treatment	-	-	34	77	-	-	-	-	1	2	8	4	-	3	-	2	131	
(c) Hospitals, after or during out-patient or day treatment	1	-	14	21	-	-	-	1	1	3	1	1	1	1	-	-	45	
(d) Local education authorities	-	-	1	-	-	-	-	-	21	8	22	11	25	17	-	2	107	
(e) Police and courts	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	
(f) Other sources	1	1	18	23	-	-	-	-	8	2	12	4	9	8	2	7	95	
(g) Total	2	1	87	147	-	-	-	1	31	15	46	21	38	30	2	11	432	

TABLE IX - NUMBER OF PERSONS UNDER LOCAL HEALTH AUTHORITY CARE AT 31st DECEMBER 1969

	Mentally Ill				Psychopathic				Subnormal				Severely Subnormal				Total
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		
	M	F	M	F	M	F	M	F	M	F	M	F	M	F	M	F	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
1. Total number	3	1	523	773	-	-	2	-	92	60	623	570	223	172	281	300	3,623
2. Attending workshops, day centres or training centres (including special units)	-	-	9	8	-	-	-	-	64	42	96	104	158	119	127	148	875
3. Awaiting entry thereto	-	-	2	-	-	-	-	-	2	-	4	6	8	11	3	3	39
4. Resident in L.A. home/hostel	-	-	9	16	-	-	-	-	1	1	13	15	10	3	8	17	93
5. Awaiting residence in L.A. home/hostel	-	-	-	-	-	-	-	-	-	-	8	7	5	3	2	2	27
6. Resident at L.A. expense in other residential homes/hostels	-	-	23	24	-	-	-	-	3	1	13	6	15	16	7	15	123
7. Resident at L.A. expense by boarding out in private household	-	-	-	-	-	-	-	-	-	2	2	2	3	5	5	6	25
8. Receiving home visits and not included in lines 1-7	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-
(a) suitable to attend a training centre	-	-	-	-	-	-	-	-	6	1	37	38	9	4	56	55	207
(b) Others	3	1	479	725	-	-	2	-	17	16	460	407	26	16	82	79	2313

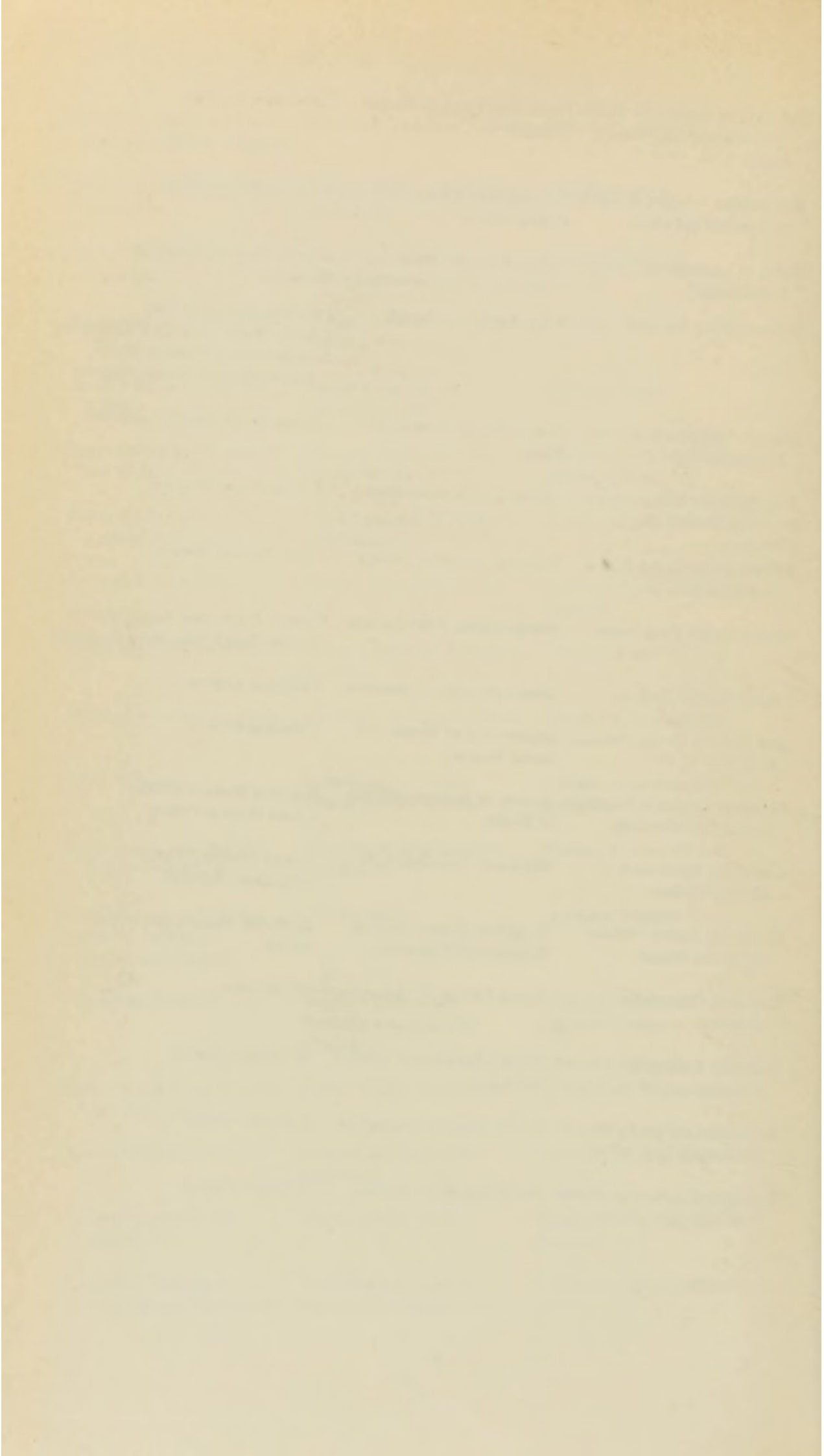
TABLE X

**Refresher and Other Courses Attended by
Members of the Staff**

Course	Organising Body	Staff Attending
One day Seminar on Preventive Dentistry	British Dental Association	1 Area Dental Officer
Post-graduate course on Mental Deficiency	North West Metropolitan Regional Hospital Board	Principal Medical Officer
Management Course for Professional and Scientific Officers	Royal Institute of Public Administration	County Psychiatric Social Worker
Residential Course (D.M.A. Revision)	N.A.L.G.O.	1 Clerical Assistant
Workshop on Community Work and Social Change	University of Manchester	1 Area Psychiatric Social Worker
Course for Chief Officers of Health and Welfare Departments and Certificate in Social Work Tutors	National Institute for Social Work Training	County Psychiatric Social Worker
Refresher Course for Matrons of Day Nurseries	North-Western Polytechnic	1 Day Nursery Matron
"Effective Writing" Course	Royal Institute of Public Administration	1 Senior Administrative Assistant
Work Study Appreciation Course for Elected Members and Chief Officers	R.I.P.A. and L.A.'s Management Service Computer Committee	Deputy County Medical Officer
"How Should we Teach Food Hygiene"	Royal Society of Health	County Public Health Inspector County Health Education Organiser
Health Congress	Royal Society of Health	County Medical Officer Superintendent Nursing Officer
Post-Certificate Course for Supervisors of Midwives	Association of Supervisors of Midwives	3 Supervisors of Midwives
8th Annual Symposium - "Medicine and Society"	Society of Medical Officers of Health	County Medical Officer Deputy County Medical Officer
Course on Social Casework	Thurrock Technical College	3 Area Home Help Organisers
Course on Cerebral Palsy and Child Neurology	Centre for Spastic Children	1 Medical Officer

Induction Course for Non-Professional New Entrants	Mid-Essex Technical College	2 Clerical Assistants
Course on Developmental Paediatrics	Society of Medical Officers of Health	1 Medical Officer
Course on Developmental Paediatrics	Cambridge University Medical School	6 Medical Officers
Study Day on "Care of the Feet"	Queen's Institute of District Nursing	7 District Nurses
Lecture Block Course for S.E.N.'s	Queen's Institute of District Nursing	1 District Nurse
Short Course on "Education and Work"	National Association for Mental Health	1 Supervisor of a Junior Training Centre
2-Day Work Study Appreciation Course	Royal Institute of Public Administration	County Medical Officer
Summer School 1969	Health Education Council Ltd.	Assistant Health Education Organiser
Training Course for S.E.N.'s	Queen's Institute of District Nursing	1 District Nurse
Middle Management Course	Mid-Essex Technical College	6 Senior Administrative Assistants
Summer School	Association of Health Administrative Officers	2 Senior Administrative Assistants
Short Course for Teachers (Health Education)	Department of Education and Science	Principal Medical Officer
One Day Courses "Photographic Aspects of Dental Radiography"	Kodak Ltd.	6 Health Visitors
Residential Seminar	National Society for Mentally Handicapped Children	6 Medical Officers 1 Speech Therapist
Follow-up Courses for Field Work Instructors	Health Visitors Association	6 Field Work Instructors
Annual Weekend School	Institute of Home Help Organisers	5 Area Home Help Organisers
"Television and Health Education"	The Chadwick Trust	County Health Education Organiser
Post-entry Training for Dental Surgery Assistants	Chelmsford College of Further Education	3 Dental Surgery Assistants

Day Release Course for Staffs in Residential Establishments	North-East Essex Technical College	1 Assistant Warden
Day Release Course for Staffs of Special Care Units	National Association for Mental Health	4 Assistant Supervisors
Series of Lectures on "Drug Dependence"	Institute for the Study and Treatment of Delinquency	County Health Education Organiser
Subject Group Meetings	Royal Society of Health	Principal Medical Officer County Health Education Organiser Superintendent Nursing Officer 7 Superintendent Health Visitors
Course - "Advances in Food Inspection"	College for the Distributive Trades	County Public Health Inspector
Post Graduate Study Course on "Organisation for Efficiency"	British Dental Association	3 Area Dental Officers
Refresher Course for Senior Nursery Staff	Havering Technical College	1 Day Nursery Matron
Mental Health Film Forum	Mental Health Film Council	County Psychiatric Social Worker County Health Education Organiser
Liberal Studies Courses	Essex Education Committee	3 Clerical Assistants
Civil Defence Course for M.O.H.'s	Department of Health and Social Security	1 Medical Officer
Refresher Course in Developmental Ophthalmology	Society of Medical Officers of Health	Principal Medical Officer 1 Area Medical Officer
Course for Supervisors of Manual Workers	Mid-Essex Technical College	3 Head Drivers (County Ambulance Service)
Course for Health Visitors and Home Nurses	St. Helena Group Hospital Management Committee	23 Health Visitors and Home Nurses
Refresher Courses for Midwives	Royal College of Midwives	33 Midwives
Refresher Courses for District Nurses	Queen's Institute of District Nursing	26 District Nurses
Refresher Courses for Health Visitors	Health Visitors Association	8 Health Visitors
Refresher Courses for Health Visitors	Royal College of Nursing	9 Health Visitors



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