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Surrey County Council

ANNUAL REPORTS

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

AND

PRINCIPAL SCHOOL MEDICAL OFFICER

For the Year 1961

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PREFACE

TO THE CHAIRMAN AND MEMBERS OF THE SURREY COUNTY COUNCIL.

Mr. Chairman, Ladies and Gentlemen,

I have the honour to present my report for the year 1961, which has been prepared in accordance with Circular 1/62 of the Ministry of Health.

The population of the County continues to expand at an increasing rate. The annual increases over the past 10 years have been 9,800, 10,000, 9,700, 7,500, 13,000, 13,800, 13,000, 13,500, 15,180 and in 1961, 16,150, an increase in the year of nearly 1.1 per cent. The total population of the County at mid-year 1961 was estimated by the Registrar-General at 1,477,330. The total number of live births was 22,423 and the total deaths was 16,629, giving an excess of births over deaths of 5,794: thus, 64.2 per cent. of the population increase was due to movement of population into the County. The county districts showing the largest increases of population were Coulsdon and Purley 3,600, Reigate 3,030, Esher 2,640, Guildford 2,120 and Godstone 2,030. Conversely, many of the county districts in the parts of the County adjacent to London showed diminished populations, the largest falls being Carshalton 3,940, Kingston-upon-Thames 2,640 and Merton and Morden 2,600.

The number of deaths was 16,629 giving a crude death rate of 11.26 per thousand and a standardised death rate of 10.81 per thousand. These figures compare with 16,230, 11.11 per thousand and 10.88 per thousand, respectively, in 1960. Of the main causes of death, the deaths from cancer increased, the largest individual site causing death being, as one would expect, cancer of the lung and bronchus; and although the deaths from cardiac and vascular disease showed a slight overall diminution, the deaths from coronary heart disease increased.

The total number of live births was 22,423 giving a live birth rate of 15.18 per thousand: this is the highest annual birth rate recorded in the County since 1948 when it was 15.79 per thousand. The continuing increase in the number of births in the County throws an additional burden on the midwifery service and the number of domiciliary births in the County increased from 6,105 in 1960 to 6,158 in 1961. The remainder of the increase was dealt with by the maternity hospitals and as the number of maternity beds available in hospitals in the County remained much the same as in previous years, the method commonly adopted for dealing with the increased numbers was by early discharge of the patients. I have commented at greater length on this undesirable practice in the body of the report (p. 22). Fortunately, the increased midwifery burden falling on the district nurse/midwives was, to some extent, balanced by a fall in the demand for home nursing. The number of home visits paid by district nurses fell from 642,363 in 1960 to 613,341 in 1961. To some extent, this decline is due to lessening of the demand for their services for giving injections. It is notable also that the volume of visiting to persons over the age of 65 has diminished.

Although the deaths from pulmonary tuberculosis showed only a fractional increase, there was a substantial increase in the number of primary notifications, partly due to a most unfortunate incident at a school where a teacher, unaware that he was suffering from tuberculosis, infected no less than 16 of the pupils under his care (p. 77). These incidents are now relatively uncommon but they are a constant source of anxiety to the department as such outbreaks produce much ill health to pupils and staff alike. Tuberculosis is a preventable disease and its control needs the continued vigilance and co-operation of individuals as well as the health department.

In April, 1961, the scheme of delegation of Health and Welfare functions to the Urban District of Woking (population at mid-year 68,180) came into operation.

Attention is directed to the extension of the Home Help Service by the introduction of a scheme for "neighbourly helps" (p. 55). This scheme is intended to encourage neighbours to assist elderly persons or others needing assistance on a service rather than an hourly basis and it is hoped will help to overcome the difficulty in recruiting home helps, particularly in the more rural areas of the County.

The mental health service continues to expand. A new training centre was opened at Morden: this is a purpose-built centre providing accommodation for 75 trainees of both sexes in three age groups (i) juniors up to 9 years, (ii) intermediate from 9 to 16 years (in two grades) and (iii) senior girls over 16 years; and replaces the smaller unit in unsatisfactory rented premises in the same part of the County. The first work unit for mentally subnormal male adults came into operation at Sutton; the workers were drawn from the three already existing units at Ewell, Morden and Sutton, the children at the Sutton centre being distributed between the other two centres. Sites had been obtained for training centres for subnormals at Caterham and Ham, and negotiations for a site were in progress at Walton-on-Thames; during the year approval for loan for the first two was obtained, and by the end of the year working drawings and specifications were in course of preparation. Local objections had delayed the project for a hostel for mentally ill persons in Wallington and the Ministry of Housing and Local Government, after a public enquiry, decided against the project of a hostel at Sutton because of the strength of local opposition. As I said in my last report, progress in the development of community care for the mentally afflicted will depend on the development of an enlightened and tolerant attitude on the part of the public towards these unfortunates whom they are asked to accept in their midst. In the meantime, however, the number of patients who have been

discharged from the mental hospital to their own homes and who then are supervised on a voluntary and friendly basis by the mental welfare officers rose considerably during the year.

Although no new welfare centre/school clinics were opened during the year, appreciable progress was made with several of them, and building is in progress at Stafford Road, Caterham; Acre Road, Kingston-upon-Thames; and the Forum, West Molesey.

During the year a review of the work of the Health Visitors was undertaken and several measures adopted, designed to relieve them of clerical work or work which could be done by less highly trained staff, so to allow them more time for their home visiting which is the primary object of their work.

The scheme for immunisation against poliomyelitis was extended to allow for a reinforcing fourth dose to children at school entry and also to children between the ages of 5 and 11 years.

The Handbook of Health Services in Surrey was revised and brought up to date.

A total of 72,921 pupils were examined under the scheme of periodic medical inspections compared with 68,492 for the previous year. Of these, 12.3 per cent were found to have defects requiring treatment. In 1960 the corresponding figure was 14.25. The percentage of children considered to be in an unsatisfactory physical condition was 0.5 per cent compared with 0.6 per cent the year before. They number 381.

Although, as in recent years, the main developments of the service have been concerned with the ascertainment and treatment of handicapped pupils, I would first like to draw the attention of members to the above figures and to the more detailed information in the body of the report dealing with periodic medical inspections in the schools, the medical re-examinations and follow-ups and the routine treatment of diseases and defects. This work which occupies by far the greater proportion of the time of the school health service staff is essentially preventive in conception and nature and like many other worthwhile but routine jobs does not attract attention and interest to the same extent as the more spectacular developments made in the various specialised fields of one or other handicaps. The value of such routine work is seen, however, in the continued satisfactory state of health of the children in the Education Committee's schools.

There were several important developments again in the provision for handicapped pupils. Among these were notably the opening of Wishmore Cross School, a unit for partially deaf children at Rivermead County Primary School, Ewell and a day class for maladjusted children at Merrow.

In addition there have been development and extensions in the audiological service, the child guidance service—which includes the school psychological service—and provision of speech therapy. The work of the department in these more specialised services is referred to in detail in the body of the report.

I should like to bring to your notice the report of the Principal School Dental Officer which is given on pages 80-82.

Once again, as always, I must draw the attention of the Council to the able and devoted work of the members of the staff of the Department.

I have the honour to be, Mr. Chairman, Ladies and Gentlemen,

Your obedient Servant.

K. A. SOUTAR,

County Medical Officer and Principal School Medical Officer.

GENERAL STATISTICS AND SOCIAL CONDITIONS.

Area.

The Registrar-General in his Census 1961 Preliminary Report incorporated revised acreage figures following an ordnance survey. These figures have the effect of increasing the total acreage of the Administrative County by 2 acres compared with the figures shown in my 1960 Annual Report. As far as County Districts are concerned the Boroughs of Barnes and Mitcham have been increased by 3 acres and 2 acres respectively and the Urban District of Merton and Morden has decreased by 3 acres.

Population.

The population of the Administrative County at the 1961 Census was 1,480,649, and the Registrar-General's estimate of the population at mid-year 1961 was 1,477,330, an increase of 16,150 over the comparable figure for mid-year 1960. The population under 1 year is given by the Registrar-General as 22,000, the population 1-4 years as 83,400, and the population 5-14 years 214,000.

The Registrar-General's mid-year estimate of the population for the Urban and Rural areas during each of the five years 1957-1961 is shown in the following table:—

	1957.	1958-	1959.	1960.	1961.
Urban Districts Rural Districts	1,255,800 163,700	1,266,000 166,500	1,275,000 171,000	1,287,550 173,630	1,299,100 178,230
Administrative County	1,419,500	1,432,500	1,446,000	1,461,180	1,477,330
Increase or decrease over previous year	+13,800	+13,000	+13,000	+15,180	+16,150

RATEABLE VALUE AND ESTIMATED PRODUCE OF A PENNY RATE.

The rateable value of the Administrative County on the 1st April, 1981, was £28,114,647, and the estimated produce of a 1d. rate for general County purposes for the year 1961-62 was £115,751.

VITAL STATISTICS.

The principal vital statistics for the year 1961 are summarised below. Additional information is given in the paragraphs which follow

Live births		***	***	22,423
Live birth rate per 1,000 population		***		15.18
Still births				308
Still birth rate per 1,000 live and still births				13.55
OD () 12 3 (OH) 2 (1)				22,731
Infant deaths				399
Infant mortality rate per 1,000 live births				17.79
" " " " legitimate births				17.17
" " " " illegitimate birth	8			30.27
Neo-natal mortality rate (first four weeks) per l	1,000	live bi	irths	13.29
Early neo-natal mortality rate (first week) per 1,				11.68
Peri-natal mortality rate (still births and deaths				
per 1,000 live and still births				25.07
Illegitimate live births per cent of total live birth				4.71
35				7
35 . 1 . 10 . 1000 131				0.31

The following statement compares the County birth and death rates for the year 1961 with the previous year and with the mean of the five years 1956-60.

						Per 1,00	0 Population		Maternal	Deaths of
					Live Birth Rate	Crude Death Rate	Death Rate from Pulmonary Tuberculosis,	Death Rate from Malignant Disease.	Mortality per 1,000 Live and Still Births.	Infants under 1 year per 1,000 Live Births.
1956					13.37	11.50	0.09	2.06	0.63	17.88
1957	- 335	3110	3115		13.83	11.19	0.07	2.09	0.75	19.26
1958	***		***		14.24	11.24	0.07	2.10	0.43	16.72
1959	***	111	***		14.33	11.47	0.06	2.17	0.24	18.82
1960	***	***	***		14.83	11.11	0.05	2.11	0.36	17.12
Mean	of 5 ye	ears, 19	56-1960		14.12	11.30	0.07	2.11	0.48	17.96
1961		***	***		15.18	11.26	0.05	2.19	0.31	17.79
			in 1961	on:						
	sars av			***	+1.06	-0.04	-0.02	+0.08	-0.17	-0.17
Prev	vious y	189			+0.35	+0.15	_	+0.08	0.05	+0.67

The population of each Sanitary District at the 1931 and 1951 Censuses and at the 1961 Census, together with the Registrar-General's mid-year 1960 and 1961 estimates, is shown in the following table:—

	V .	trea in		C R S	NE SER	P	POPULATION					Censal increase or decrea 1951—1961 (Persons)	e or decrease (Persons)	Roolstear	ble:
DISTRICTS	40	dand and inland		1931			1961	140		1961			Percentage	General's Estimate (Mid-year)	General's Estimate (Mid-year)
		water)	Persons	Males	Females	Persons	Males	Females	Persons	Males	Females	Numbers	decrease	1960	1961
M.B. and Urban	_														
. Banstead	:	12,821	18,734	8,536	10,198	33,529	15,228	18,301	41,573	19,451	22,122	+8.044	+24.0	39,250	40.990
Raddington and Walliam	:	2,520	42,440	18,638	23,802	40,593	18,145	22,448	39,757	17,867	21,890	-836	- 2.1	38,800	38,990
Carshalton	:	3,040	20,000	12,030	14,298	1000	15,080	17,677	000000000000000000000000000000000000000	15,237	17,351	-169	0.0	32,330	32,590
and Warlingham		8,233	91 774	10,830	10,038	21 002	15,434	900,000	24,500	27,379	29,883	6,259	1.8.4	60,430	26,490
. Chertsey	:	9,983	16,988	8,283	8,705	30,852	14,813	16,039	40,376	19,951	20,425	+ 9,010	+30.0	39,790	35,000
Coulsdon and Purley		11,143	39,795	17,325	22,470	63,773	28,500	35,273	74,738	34,609	40,129	+10,965	+17.2	70,200	73,800
. Eghan	: :	9,511	15,204	6,939	8,265	20,252	9,262	10,990	22,594	10,504	12,090	+2,342	+11.6	21,390	22,420
and Ewell		8,427	35,231	15,762	19,469	68.055	31.372	36.683	71,177	14,507	27 046	4 5,568	+23.7	30,180	31,120
. Eshor		14,850	32,407	14,577	17,830	51,432	23,411	28,021	60,586	28,342	32,244	+9.154	+17.8	57.850	60,490
Farmham Frimley and Camburlay	:	9,039	19,005	8,725	10,280	23,928	10,894	13,034	26,927	12,474	14,453	+2,999	+12.5	25,810	27,030
Godalming	::	2,393	10.940	4.072	7,360	20,386	10,648	9,838	30,342	14,502	15,840	+9,956	+48.8	28,210	29,050
		7,323	34,237	15,836	18,401	48,048	21,777	26,271	53,977	24.784	99,380	2001	+10.7	59,050	16,390
, Haslemere	:	5,751	9,168	3,685	5,483	12,003	5,133	6,870	12,528	5,577	6,951	+525	+4.4	12,180	12,830
Inames	:	11,408	39,825	18,681	21,144	40,174	18,423	21,751	36,450	16,845	19,605	-3,724	-9.3	38,630	35,990
Malden and Coombe		3,164	23,350	10,636	12,714	45.566	21.076	24,490	46,004	16,838	18,716	+8,348	+30.7	35,570	36,220
Merton and Morden	-	3,234	41,227	19,751	21,476	74,730	35,277	39,453	67,974	32,110	35.864	6,756	9.0	70,220	67,620
-		2,934	56,872	1000	29,047	67,269	32,384	34,885	63,653	30,882	32,771	3,616	-5.4	64,090	63,790
Biehmond	:	4 100	26,047	17,558	18,989	42,248	19,100	23,148	53,710	25,216	28,494	+11,462	+27.1	51,230	54,260
		4,709	30,178	13,667	16.511	60.875	28.501	39.374	69 940	18,939	22,063	0.040	010	42,270	40,700
Sutton and Cheam	:	4,338	48,363	22,065	26,298	80,673	36,879	43,794	78,969	36,400	42,569	-1.704		79.860	77.980
ybridge	:	9,049	25,658	11,339	14,319	38,112	17,698	20,414	45,497	21,495	24,002	+7,385	+19.4	44,510	45,360
8. Woking	: :	15,708	36,000	16,458	19,512	47,596	22,030	25,281	67,485	32,233	31,334	+19.889	+41.8	57,460	56,990
Totals	-	018,861	835,859	382,598	453,261	1,203,088	556,059	647,029	1,302,572	610,554	692,018	+99,484	+ 60.00	1,287,550	1.299,100
Rural.															
L. Bagshot		16,083	11,080	5,599	5,481	14,109	6,803	7,306	16,744	7,921	8,823	+2,635	+18.7	16,060	16,200
3. Godstone		59,943	18,492	8,791	19,701	010000000000000000000000000000000000000	12,271	13,561	31,698	15,293	16,405	+5,866	+ 250.7	31,470	31,610
	: :	59,643	31,547	15,848	15,699	44,936	21.997	956.938	54,777	18,558	98,030	+7,245	1.554	87,940	39,970
5. Hambledon	:	68,175	24,926	11,791	13,135	31,851	14,777	17,074	34,790	16,559	18,231	+2,939	+9.2	34,960	35,270
Totals	1	250,351	111,911	53,960	126,75	149,551	71,142	78,409	178,077	85,078	92,999	+28,526	+19.1	173,630	178,230
dministrative County	1	449,161	947,770	436,558	511,212	1,352,639	627,201	725,438	1,480,649	695,632	785,017	+128,010	+9.5	1,461,180	1,477,330
	-	-													

Births and Birth Rate.

The live births registered in or belonging to the County during the year numbered 22,423, of which 11,571 were males and 10,852 females, as compared with 21,675 in the previous year, showing an increase of 748. The birth rate for the year was 15.18 as compared with 14.83 for the previous year.

The live birth rate is based on the number of live births per 1,000 of the estimated population of the area. The local rates shown in the Table on page 9 are not validly comparable by reason of the fact that the area populations on which they are based may be of widely differing sex-age constitutions. With a view to eliminating this element of variation the Registrar-General has supplied a comparability factor for each area and this when multiplied by the live birth rate of the area produces an adjusted rate which may be regarded as comparable with the adjusted rate of any other area or with the crude live birth rate for England and Wales.

The factor for the Administrative County is 1.01, for the aggregate of Urban Districts 1.01 and for the Rural Districts 1.01. The effect of these factors on the 1961 crude live birth rates is shown below:—

		Ad	lministrative County.	Urban Districts.	Rural Districts.
		p	er 1,000 of	estimated home	population.
Crude rates	 		15.18	14.97	16.71
Adjusted rates	 		15.33	15.12	16.88

The birth rate for England and Wales for 1961 was 17.4 and for 1960, 17.1.

In addition to the 22,423 live births in Surrey, there were 308 still births and the rate of still births per 1,000 live and still births was 13.55 as compared with an average rate of 16.77 for the quinquennial period 1956-60.

Of the 22,423 live births 1,057 or 4.71 per cent. were illegitimate, as compared with 949 or 4.38 per cent. in 1960.

The incidence of live births, still births and illegitimate births in recent years was as follows:-

Year.	Live births.	Live birth rate.	Still births.	Rate of still births per 1,000 live and still births.	Illegitimate births.	Percentage of total live births
1931	. 13,125	13.92	441	32.5	564	4.3
	16,011	13.47	469	28.5	1,048	6.55
	. 19,706	16.57	562	27.7	1,251	6.35
	20,436	17.34	571	27.2	1,420	6.95
1944	20,377	17.86	512	24.5	1,561	7.76
	18,676	16.03	400	21.0	1,670	8.94
	23,086	18.19	540	22.9	1,381	5.98
1947	24,099	18.48	525	21.3	1,102	4.58
1948	20,926	15.79	412	19.3	997	4.76
1949	19,668	14.71	399	19.9	897	4.56
1950	18,386	13.53	358	19.1	777	4.23
1951	17,841	13.16	383	21.0	728	4.08
1952	17,633	12.91	344	19.1	682	3.87
1953	18,187	13.22	337	18.2	751	4.12
	18,193	13.13	352	19.0	778	4.28
1955	18,305	13.14	334	17.9	749	4.09
	18,794	13.37	322	16.8	769	4.09
	. 19,627	13.83	373	18.65	767	3.91
1958	20,398	14.24	364	17.53	839	4.11
	20,725	14.33	328	15.58	827	3.99
1960	21,675	14.83	336	15.27	949	4.38
1961	22,423	15.18	308	13.55	1.057	4.71

Deaths and Death Rate.

The number of deaths registered in the Administrative County during 1961 was 16,629, as compared with 16,230 in the year 1960. The crude death rate for 1961 was 11.26, compared with 11.11 for 1960. The death rate for England and Wales in 1961 was 12.0 compared with 11.5 for 1960.

Infant Mortality.

The number of infants under one year who died during 1961 was 399 compared with 371 in 1960. This represents an infant mortality rate of 17.79 per 1,000 live births as compared with a corresponding rate of 17.12 for the year 1960. The comparable figures for England and Wales were 21.4 in 1961 and 21.7 in 1960.

The following table gives certain figures relating to the infant mortality rates in recent years in England and Wales and in Surrey:—

		England and Wales.			Surrey.	
Year.	Infant Mortality Rate.	Neo-Natal Mortality Rate.	Mortality Rate 4 weeks to 12 months.	Infant Mortality Rate.	Neo-Natal Mortality Rate.	Mortality Rate 4 weeks to 12 months
1931	65.7	31.5	34.2	43.12	24.84	18.28
1941	60.0	29.0	31.0	44.60	26.17	18.43
1942	50.6	27.2	23.4	38.26	23.09	15.17
1943	49.1	25.2	23.9	36.70	22.36	14.34
1944	45.4	24.4	21.0	36.90	22.03	14.87
1945		24.8	21.2	34.05	22.06	11.99
1946	42.9	24.5	18.4	27.85	18.84	9.01
947		22.7	18.7	27.68	18.22	9.46
948		19.7	14.2	23.94	16.06	7.88
949		19.3	13.1	24.05	16.07	7.98
1950		18.5	11.3	21.86	15.45	6.41
951		18.8	10.8	21.75	16.31	5.44
952		18.3	9.3	20.93	14.57	6.36
953		17.7	9.1	20.56	13.86	6.70
1954		17.7	7.8	19.35	13.08	6.27
955	24.9	17.3	7.6	18.08	12.95	5.13
956	23.8	16.9	6.9	17.88	12.13	5.75
957	23.0	16.5	6.5	19.26	14.78	4.48
958		16.2	6.4	16.72	12.11	4.61
959	22.0	15.8	6.2	18.82	13.70	5.12
960		15.6	6.1	17.12	12.92	4.20
1961	21.4	15.5	5.9	17.79	13.29	4.50

Maternal Mortality.

In 1961 7 women died from causes associated with pregnancy and child bearing including abortion. This gives a maternal mortality rate of 0.31 per thousand live and still births. The corresponding figures for England and Wales in 1961 were 274 and 0.33: and for Surrey in 1960 were 8 and 0.36.

Causes of Death.

The grouped causes of death arranged in order of frequency in 1961 in the County were as follows:—

							Deaths	Percentage o Total Death
Diseases of the heart .		a Page					5,393	32.43
M. 1:	••	***	***	***	***	***	3,235	19.45
		1	***		***	***		
Vascular lesions of the					****	2211	2,147	12.91
Bronchitis, pneumonia	and	other	diseas	ses of	respira	tory		
		***	111	***	***	222	1,891	11.37
Other circulatory diseas	es	***			***	200	850	5.11
TTI-I A		***			111		680	4.09
Digestive diseases .		***					205	1.23
Congenital malformation							145	0.87
Diabetes							131	0.79
Leukaemia, Aleukaemia						1000	98	0.59
		111	10.0	211	****	***	91	0.55
		***	***	***	***	***		
Tuberculosis (all forms)		***	***	***	911	111	89	0.54
All other causes .			***	***	***	***	1,674	10.07
							16,629	100.00

The following table gives the births and birth rates, both live and still, the deaths and death rates, both crude and standardised,* and the infant mortality in each of the Sanitary Districts and in the Administrative County during 1961:—

DISTORES			Lave births.			Adjusted		Rate per 1,000 five	-		Standard-	Excess of	-	Infants dying	100
DISTRICTS		M.	ti.	Total	rate.	carro rate.	births.	and still births.	Deaths.	desth rate.	Death Rate.	deaths.	under 1 week.	1—4 weeks.	4 weeks to
M.B. and Urban	i	277	247	524	12.78	13.80	10	9.45	507	12.37	10.76	+17	NO.	1	10
Barnes Beddington and Wallington		230	20.00	518	13.29	13.29	4 4	7.66	490	19.57	10.56	++	69 10	60	
Carshalton Caterham and Warlineham		391	340	731	12.94	10.94	==	14.82	563	9.97	11.86	+168	210	1	
- Constitution		1	907	740	00.00	00 00	: :		0.00	1000	10.01	400	0 (9
Coulsdon and Purley	: ;	555	561	1,116	15.12	16.33	212	15.00	886	12.01	10.99	+502	cn oc	01	00 00
Dorking	;	213	161	374	16.68	17.01	00 0	7.96	279	12.44	11.32	26+	00 :	-	24 (
Epsom and Ewell	11	419	379	798	11.39	13.55	27	14.81	980	13.99	9.51	+169	13	1	מו פז
Esher	1	467	417	884	14.61	14.32	10	11.19	809	10.05	10.65	+276	6	7	9
Farnham	:	26.50	192	420	15.54	15.54	9 7	14.08	387	14.32	10.74	+33	90		9
Godalming	: :	129	200	256	15.62	16.24	+ °	12.23	187	11.41	10.52	+519	90 es	-	0 -
:	1	398	383	781	14.41	13.69	16	20.08	577	10.65	10.22	+204	0.00	-	- 01
Haslemere	-	80	70	150	11.69	11.57	1	6.62	171	13.33	10.80	-21	10	1	1
ame	:	076	27 20 00	639	17.75	17.57	= °	16.92	471	13.09	11.52	+168	61	10	01 -
Malden and Coombe	: :	286	520	536	11.47	11.93	9 00	14.71	531	11.36	12.16	+ + +	- 9	.	+ 01
Merton and Morden	:	433	38.53	816	12.07	12.91	120	14.49	772	11.42	12.79	+44	=	65	7
		483	445	958	14.55	14.26	9	6.42	652	10.22	12.06	+276	15	1	01
Richmond	: :	347	314	199	16.24	15.27	0 01	13.43	626	15.38	10.92	+148	- 00	9 00	
Surbiton Sutton and Cheam		461	463	1 100	14.70	14.70	22.0	12.82	664	10.56	11.19	096+	==	01 -	010
			2	-0110	11.13	01:10	1	10.01	212	12.40	11.30	A21+	1.0	1	1
ridge	:	3852	326	200	15.61	14.83	25	13.93	486	10.71	10.71	+ 5000	10 9	-	00 0
Woking	:	609	634	1,243	18.23	17.87	11	13.49	089	9.97	9.27	+ 263	0 6	01	9 00
Total	:	10,046	9,399	19,445	14.97	15.12	269	13.65	14,793	11.39	10.82	+4,652	231	30	88
Bagshot		134	138	01	16.79	17.13	œ	98.87	183	98 11	10.65	1 80	61	1	1
Dorking and Horley	:	278	269	547	17.30	17.30	9	10.85	301	9.52	10.00	+246	0	1	03
	:	348	304	652	16.31	16.64	6	13.62	445	11.13	10.24	+207	1-1	7	+
Hambledon	: :	263	236	499	14.15	14.15	10	11.88	00000	10.83	10.46	+483	I- 10	21	100
Total	:	1.525	1.453	9.978	16.71	16.88	30	19 08	1 69.0	10.50	10.40	13 340	1.6	a a	1.9
						2000	-	2000	nante	40.00	40.40	TAIRE	0.1	,	
Administrative County	:	11,671	10,852	22,423	15.18	16.33	308	13.55	16,629	11.26	10.81	+5,794	262	36	101

The infant mortality rates in the urban and the rural districts respectively were 17.95 and 16.79, the neo-natal mortality rates for the urban and the rural districts respectively were 13.42 and 12.42 and the early neo-natal mortality rates for the urban and rural districts respectively were 11.88 and 10.41.

The number of deaths and the death rates per 1,000 population from certain important causes of death in each of the sanitary districts and in the Administrative County during 1961, together with the total number of deaths from each of these diseases in the Urban and Rural areas and in the Administrative County, are shown in the following table:—

		Vascular	-	Heart	40	and Vascular	ā _		-		Pulm	onary	Respi	Respiratory				200	alignan	Malignant Disease		+	Other		
		bestons of nervous system.		Coronary disease, augina	1	tension with heart disease	-	Other heart disease.	chec	Other eireulatory disease,	Tuber	Tuberculosis,	(Non- Tuberculous)	rulous)	Malignant proplasm, stomach.	sant sem,	Malignant neoplasm, hnng, bronchus,	ant sm,	Malignant neoplasm, breast.		Malignant neoplasm, uterus.		malignant and lymphatic neoplasms.		Violence
		No. I.O	Rate per 1,000	No. H	Rate Der 1,000	Bate per 1,000	No.	Rate 1,000	No.	Rate per 1,000	No.	Rate 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Bate per 1,000	No.	Rate 7	No. Pr	Rate per 1,000	No. per 1,000	No.	Bate 1,000
M.B. and Urban. Barres Barres Carbington and Wallington Carbinkon Carbinan and Warlingham	11111	25,553	48822	25882	88888	46664	28862 88888	99795	88281	1925,525	= -∞∞°°°	110001190	552472	123.51	001280	अन्तर्भव	. t-x +10 c	F014014	22020	######	01+0001+	8968	24 6 8 8 9 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	080000 100000	22249
11111	11111	81845	*2862	25255	1154 2250 1198 1198	20-22 20-23	7048 118 35 25 25 25 25	18881	19222	48248	11-1"	11010	25525	881188	×1-022	84444	25,13	24448	-8e-5	HERSE	44 910	98 85	PESSE SSESS	18221	25125
Esher Paraham Primley and Camberley Godalming Gulldford	11111	28225	98556	54858	20138	40+01-	55485 55485 55485	317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 317575 31757 317	88-08	38434	04 -09	8 88	22228	22825	00000	18484	23223	54856	1+×-0	25222	1000000	81225	75 22 23 25 25 25 25 25 25 25 25 25 25 25 25 25	121-01-01 01-11-01	48484
Hashemere Kingston-upon-Thames Leatherhead Malden and Coombe Merton and Morden	11111	88888	55,55	88425 994-99	23222	12450	18993	88585	*8=8\$	무명목목단	1 0100 4	18818	22822	1.69	05000	84896	# 5555	282285	02022	88448	наныа	81898	188886	925538	88444
11111	11111	1:8525	18586	882588 61-010101	82888	14848	12818 1818 1818 1818 1818 1818 1818 181	80-80 90-80 90-80 90-80 90-80	82288	語者業場に	0140XH	964519	22122	25254	#==##	49458	82332	23248	52227	122523	24244	111522	28122 811111	000000	22224
Walton and Weybridge Wimbledon	111	888	1,30	9448	55831	445	25 25 143 143	0 1.10 3 2.10	888	298	00-00	25.00	525	11.26	9119	818	*12.7	8,628	0 0 0 0	1233	01000	5010	51 1.12 89 1.56 64 .94	2316	25.5
1111		1,913 1.	1,47 2,	2,675 2	2.06 21	712	.17 1,880	0 1.45	168	.59	7.1	50.	1,698	1.31	3000	7	717	-55	208	12.	107	.08 1,442	1.11	10	24.
Rural. Dorkhot and Rorley Coulstone Guildford Hambiedon	11111	111223	75858 75858	88888	233 130 1.74 1.74		35922 46646	279675	52525	243228	1_1 0.2	1 2 1 20 20	1111111	211118 211118	- 30 1- 011-	क्षत्रवाह्य स्थान	5-1489 1	2,4828	40030	25,025,035	010000000	28888	1595E	×2888	58584
1		234 1	1.31	338 1	1.90	35 .20	248	8 1.39	825	.46	15	.00	193	1.08	355	.20	8	98.	17	00	11	161 80.	107	2 87	95.
Administrative County 1961		2,147 1	1,45 3,	3,013 2	2.04 25	252 .17	7 2,128	8 1.44	850	95.	2.6	50.	1,891	1.28	347	.03	186	.53	848	157	121	.08 1,633	11.11	089	.46
Percentage of Total Deaths in 1961	of .	(13,41)	_	18.12 (17.96)		1.52 (1.93)		12.80 (13.62)		5.11 (5.45)	98	0.46 (0.45)	(9.93)	37.	(2.16)	26	(4.44)	200	(1.85)		0.73	-	9.82 (9.78)		4.09

The figures shown in brackets relate to the year 1960,

ADMINISTRATIVE COUNTY OF SURREY.

Causes of Death at Different Periods of Life, 1961.

The causes of all deaths during 1961 are classified in age groups for the aggregate of urban districts and for the aggregate of rural districts in the following table :— $\,$

					Aggre	egate o	of Urb	an Dis	tricts.				A	ggreg	ate o	f Rur	al Di	istrict	8.	
	Causes of Death.	Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-	65-	75-
	All Causes	M. F.	7,075 7,718	189 160	36 24	41 32	96 35	221 203		1,895 1,660		915 921	32 18	7 3	3 1	14 5	23 19		247 214	365 524
1.	Tuberculosis, Respiratory	M. F.	58 13	_	=	=	-	3 2	18 5	30 4	7 2	4 1	-		-	-	-	=	2	2
2.	Tuberculosis, Other	M. F.	8	=	1	1	1	-	3	2 2	- 2	1	-	_	-	-	-	1	=	-
3.	Syphilitic Disease	M. F.	17 18	-	=	=	=	1	3 7	9 6	4 5	3	-	-	-	=	-	2 -	- 1	1
4.	Diphtheria	M. F.	=	-	_	=	-	=	-		-	-	=		=	-	-	-	-	-
5.	Whooping Cough	M. F.	1	1	=	=	-	-	=	=	-	-	_	-	=	_		-	-	-
6.	Meningococcal Infections	M. F.	1 5	1	-	- 02	-	=	_ 	=		=	_	-	-	=	-	-	=	-
7.	Acute Poliomyelitis	M. F.	1 1			=	-	1	-	=	=	-	_	-	=	-	-	-	=	-
8.	Measles	M. F.	- 3	=	_	- 3	=	=	=	=	=		_	-	=	=	=	-	=	-
9.	Other Infective and Parasitic Diseases	-	11 12	1 2	1	1	=	1	4 4	3 2	-4	2 2	-	=	E		=	1 1	1 1	-
10.	Malignant Neoplasm, Stomach	M. F.	169 143	_	_	=	-	5	72 32	51 45	41 62	21		=	E			8 4	7 4	6
11.	Malignant Neoplasm, Lung. Bronchus	-	590 127	-	=		1	9 5	291	200	89	58	=	_		=	2 1	28 2	22	6 2
12.	Malignant Neoplasm, Breast		3 304	-	=			20	1 139	1 72	41 1 73	-	_	-	-	-	- 5	16	- 8	12
13.	Malignant Neoplasm, Uterus	-	107	-		=	-		52		_	41	_	_	_	-	-	7	- 3	3
14.	Other Malignant and Lymphatic Neoplasms	M. F.	698 744	=	3	3	10	24	218	207	22	104	=	1	_	-	3	29	37	34
15.	Leukæmia, Aleukemia	M. F.	43 42	-	2	5	1	6	12	7	10	9	-	1	-	-	2	32	23	29
6.	Diabetes	M.	48	-	-	-	-	5	11	10	20	8	=	-	=	1	-	1	4	4
17.	Vascular Lesions of Nervous		685	_	=	1	_	12	10	195	38	99	-	-	_	-	1	16	28	54
18.	System Coronary Disease, Angina		1,609	=	=	_	1	37	138	470	827 500	211	-	-	_	-	4	64	63	84
9.	Hypertension with Heart		76	=	_	-	-	2	152	289	623	127	-	-	_	-	-	18	41	68
30.	Other Heart Disease		620	-	_	_	3	10	76	36 134	97 397	24 84	-	-	_	-	2	5	19	58
21.	Other Circulatory Disease	F.	335	-	_	1	2	9	73	206	955 167	36	-	-	-	1	3	10	9	131
2.	Influenza	F.	433	_	_	_	1	9	38	84	301	46	-	-	-	-	1	11	8	26
		F.	55	1		-	1	2	6	12	33	4	-	-	-		-	1	2	1

ADMINISTRATIVE COUNTY OF SURREY-continued.

CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE, 1961 -continued.

The causes of all deaths during 1961 are classified in age groups for the aggregate of urban districts and for the aggregate of rural districts in the following table :—

	C	0		-	Aggreg	nte o	i Uro	an Di	stricts				Ag	grega	ite of	Rur	al Di	strict	8.	
	Causes of Death.	Sex	All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-	65-	75
28.	Pneumonia	M. F.	412 507	27 9	8 4	2 1	5	5 8	60 38	91 86	214 356	52 54	5 3	1	-	-	=	8 3	6 10	33
24.	Bronchitis	M. F.	484 183	2	9 -	-1		-1	131 20	157 42	192 117	43 24	=	-	-	-	-	11 3	16 11	10
25.	Other Diseases of Respira- tory System	M. F.	66 46	1	=	-	2	3 2	17 9	19 9	24 25	6 14	_	1	-	=	=	1 2	2	11
26.	Ulcer of Stomach and Duo- denum	M. F.	67 45	_		_	=	3	18 6	17 10	29 28	8 7	_	-	_	=	-	3	3 1	1
27.	Gastritis, Enteritis and Diarrhœa	M. F.	27 42	4 2	2	1	=	1	8	9 14	2 22	1 8	=	=	-	=	1	Ξ	3	
28.	Nephritis and Nephrosis	M. F.	40 39	-	11	2	2	4 1	18 13	8 10	8 12	4 4	_	-	=	-	=	1 1	2	
29.	Hyperplasia of Prostate	M. F.	77	_	-	=	_	_	8 —	11	58	9	_	_	-	=	=	_	3	-
80.	Pregnancy, Childbirth, Abortion	M. F.	7	=	_	=	=	7	=	=	=	=	=	_	=	_	=	=	=	-
81.	Congenital Malformations	M. F.	65 69	36 39	8	6 5	1 2	1	10 11	2 3	1 2	6 5	3	2	-	_	1	1	<u>_</u>	-
82.	Other Defined and Ill-defined Diseases	M. F.	526 725	113 99	3 6	10 6	13 7	27 29	107 100	102 129	151 349	71 88	20 11	2	1	_	3 2	12 6	10 15	5
33.	Motor Vehicle Accidents	M. F.	111 44	=	4 2	3 2	36 7	15 2	21 10	15 11	17 10	31 8	_	_	2	13 3	3	9 2	1 2	
84.	All Other Accidents	M. F.	106 159	6	2 4	8 3	15 2	18 7	28 18	6 28	27 91	19 23	4	1	=		1	6 2	5	1
85.	Suicide	M. F.	89 74	=	_	-	5	20 20	45 38	13 10	6 5	11 5	_	-		1	1	5 2	4 2	-
36.	Homicide and Operations of War	M. F.	3 3	1 1	-	=	-	2	=	-	=	-	-	-	-	-	-	=	-	

Infectious Diseases: Notifications and Deaths.

The following table shows the incidence of infectious disease in the County during the year 1961, giving the number of cases of each disease notified and the attack rate:—

					11	961
	Dise	ase.			Number of cases notified.	Attack-rate per 1,000 population.
Acute encephalitis	_					
Infective					 2	0.001
Post infectious					 2	0.001
Acute pneumonia		***			 389	0.26
Acute poliomyelitis	NAME OF TAXABLE PARTY.				777	12070
Donalutio					 10	0.007
37 71 11 11					 1	0.001
TALL ALL					 -	
Donouston					 311	0.21
Enteric or Typhoid	Feve	r		***	 3	0.002
** ** ** ** ** ** ** ** ** ** ** ** **					 63	0.04
Pond malamina			***	***	 150	0.10
Measles, excluding					 22,776	15.42
Meningococcal Infe					 10	0.007
*Ophthalmia neonate					 8	0.36
Paratyphoid fevers					 7	0.005
Puerperal Pyrexia					 425	18.69
Constat Dames					 520	0.35
Tuberculosis-Pulm	onary				 534	0.36
		onary			 62	0.04
\$171					 687	0.47

^{*} Rate per 1,000 live births.

During the year deaths occurred from the following infectious diseases as shown :-

Measles			 	 3 ()
Whooping (lough		 	 1(1)
Diphtheria			 	 - (-)
Influenza			 	 91 (28)
Meningococ	cal infe	ections	 	 6 ()
Acute Polio	myelit	is	 	 2 ()

The figures in brackets relate to the year 1960.

Tuberculosis.

NOTIFICATIONS.

The summary of returns for 1961 from the Medical Officers of Health of County Districts shows that primary notifications were received in respect of 534 cases of pulmonary tuberculosis and 62 cases of non-pulmonary tuberculosis during the year.

The notifications and the case rates for pulmonary tuberculosis and for other forms of tuberculosis in 1961 and in certain preceding years were as follows:—

	PULMONARY 1	TUBERCULOSIS	OTHER FORMS O	FTUBERCULO
Year.	Primary cases notified.	Case- rate per 1,000 popula- tion.	Primary cases notified.	Case- rate per 1,000 popula- tion.
1921	648	0.88	127	0.17
1931	802	0.85	194	0.21
1941	1.049	0.88	280	0.24
1951	1,118	0.82	155	0.11
1952	1,209	0.89	136	0.10
1953	988	0.72	131	0.10
1954	865	0.62	142	0.10
1955	747	0.54	99	0.07
1956	737	0.52	69	0.05
1957	666	0.47	62	0.04
1958	615	0.43	73	0.05
1959	580	0.40	57	0.04
1960	442	0.30	70	0.05
1961	534	0.36	62	0.04

[†] Rate per 1,000 live and still births.

For the first time since 1952 the number of notified primary cases of pulmonary tuberculosis and the case rate per 1,000 population rose. There were 534 notifications in 1961 (442 in 1960) and the case rate rose from 0.30 to 0.36. This change in the situation is not sufficiently large to cause serious anxiety; nevertheless, the trend is disturbing, and the figures for 1962 will be watched very closely.

The number of patients on the registers who had a positive sputum within the last six months of 1961 was 154, and shows no change from the previous year.

The case rate of non-pulmonary tuberculosis for 1961 fell very slightly from 0.05 (in 1960) to 0.04. There was a decrease of 8 in the number of notifications of non-pulmonary tuberculosis in comparison with the 1960 figure.

The case rates for Surrey, compared with those for England and Wales in 1961, were as follows:-

			Surrey.	England and Wales.
Pulmonary Tuberculosis	***	***	0.36 per 1,000	0.42 per 1,000
Non-Pulmonary Tuberculosis			0.04 per 1,000	0.06 per 1,000

The age and sex distributions of the new notifications received by the District Medical Officers of Health throughout the year were as follows:—

							Pulm	onary.	Non-Pu	Imonary.	70.000.000
	٨	ge peri	iod.				Male.	Female.	Male.	Female.	Total
Und	ler on	e year					_	2	-	222	2
One	and	under	2	years		244	1	1 3	2		2 4
2	**	**	5	**	***		7	3		-	10
5	**	**	10	**	***	***	1	2	-	3	6
10		**	15	**	***	***	16	4	2 4	-	22
15	**	**	20	**	***	***	15	18		3	40
20	**	**	25	**			26	29	2	5	62
25	**	**	35	**	***	200	54	38	2 4 3	8	104
35	**	**	45		***	***	57	26		6	92
45	9.9	33	55	**		***	63	27	4	5 8 6 2 2 2 3 3	96
55	**	**	65	**	***	***	68	13	1	2	84
65			75	33		225	31	13	4	3	51
75 a	ind up	pward	s	•••	***	***	16	3	1	3	23
				To	tals		355	179	27	35	596
						1960	289	153	27	43	512
						1959	365	215	27	30	637
						1958	395	220	26	47	688
						1957	422	244	18	44	728
						1956	460	277	23	46	806
						1955	468	279	34	65	846
						1954	502	363	61	81	1,007
						1953	587	401	51	80	1,119
						1952	707	502	58	78	1,345

DEATHS.

The numbers of deaths and the death rates for pulmonary tuberculosis and other forms of tuberculosis in 1961 and in certain preceding years were as follows:—

	Pulmonar	y Tuberculosis.	Other forms	of Tuberculosis.
Year.	Deaths.	Death rate per 1,000 population.	Deaths.	Death rate per 1,000 population.
1921	449	0.61	109	0.14
1931	524	0.56	81	0.09
1941	566	0.48	116	0.10
1951	260	0.19	37	0.03
1952	227	0.17	26	0.02
1953	226	0.16	25	0.02
1954	153	0.11	26	0.02
1955	140	0.10	16	0.01
1956	128	0.09	13	0.01
1957	97	0.07	17	0.01
1958	100	0.07	19	0.01
1959	85	0.06	17	0.01
1960	72	0.05	7	0.005
1961	76	0.05	13	0.01

The 1961 death rate for pulmonary tuberculosis (0.05) equalled the lowest on record. The rate for non-pulmonary tuberculosis rose very slightly from 0.005 (1960) to 0.01.

Provisional death rates for England and Wales in 1961 were as follows:-

Pulmonary tuberculosis ... 0.065 per 1,000 Non-Pulmonary tuberculosis ... 0.007 per 1,000

The distribution of the deaths and the death rates from tuberculosis in the various sanitary districts of the County is shown on page 11 and tables showing the causes of all deaths in 1961, classified in age groups for the aggregate of urban districts and for the aggregate of rural districts will be found on pages 12 and 13.

The statistics quoted above are supplied by the Registrar General. It should be noted, however, that not all deaths of tuberculous patients are included under the heading of tuberculosis for the reason that, as a general rule, the Registrar General only allocates a death to tuberculosis when that disease is the sole or underlying cause of death.

In 1961 some 206 tuberculous patients (of whom 175 were notified cases) died as follows:-

	Pulmonary.	Non- Pulmonary.	Total.
Deaths allocated by the Registrar General (tuberculosis being the sole or underlying cause)	76	13	89
Deaths not allocated by the Registrar General (tuberculosis being one of the causes but not the sole or underlying cause)		_	46
Deaths not allocated by the Registrar General (tuberculosis not being one of the causes)	66	5	71
	188	18	206

There were 31 deaths of unnotified cases of tuberculosis in 1961 as follows:—

In Hospitals. At Home, etc. Total. 17 14 31

This is a slight increase over the previous year's total (29).

REGISTERS.

Each District Medical Officer keeps a register of the known cases of tuberculosis resident in his sanitary district. The numbers of cases on the district registers on the 31st December, 1961, were as follows:—

					Pulmonary	Non- Pulmonary
Males Females	 	 			5,038 3,676	419 614
			Totals		8,714	1,033
		Gra	nd Total	***	9,	747

The total of 9,747 is a decrease of 355 as compared with the figure of 10,102 for 1960. The number of pulmonary cases has fallen by 328 and the non-pulmonary figure has decreased by 27. The corresponding total for 1959 was 10,702.

During 1961, 357 cases were transferred in from outside the County and 457 were transferred out. The names of 664 patients were removed from the Register on the grounds of recovery.

The total of 7,714 cases on chest clinic registers for 1961, as set against 9,747 on the District Medical Officers' registers, represents a difference of 2,033. It is still essential for the District Medical Officer of Health to continue to keep a register of all the tuberculous cases in his area.

WORK OF THE COUNTY HEALTH DEPARTMENT.

Details of the work of the department are given in the subsequent sections of the Report. There are, therefore, only a few matters to which I need refer here.

Capital Building Programme.

The following capital building projects have been completed since my last report :-

Project.				Purpose,	Date Completed.	
Slade Road, Ottershaw Woodham Lane, New Haw	***	***		House for district nurse/midwife Three flats for district nurses/midwives		February, 1962. February, 1962.

In addition progress has been made with some of the outstanding projects as the following table shows:—

Project.	Purpose.	Present Position.
1960-61 CAPITAL BUILDING PROGRAMME. Stafford Road, Caterham	Welfare Centre/School Clinic	Building work in progress.
Acre Road/Cross Road, Kingston The Forum, West Molesey	Welfare Centre/School Clinic/Dental Laboratory Welfare Centre/School Clinic	Building work in progress. Tender accepted and building work
Shotfield Road/Stanley Park Road,	Welfare Centre/School Clinic	in progress. Loan sanction granted by Minister of
Wallington		Housing and Local Government Tenders invited.
1961-62 CAPITAL BUILDING PROGRAMME.		
Kings Road, Richmond	To improve and enlarge existing Welfare Centre/Divisional Office	Work in progress.
Bury Fields, Guildford Victoria Road, Horley	Welfare Centre/School Clinic Welfare Centre/School Clinic/two flats for nurses	Site purchased and tenders invited. Loan sanction granted by Minister of Housing and Local Government and tenders invited
Manor Drive, Malden	Welfare Centre/School Clinic	and tenders invited. Loan sanction granted by Minister of Housing and Local Government and tenders invited.
Church Street, Epsom	Welfare Centre/School Clinic and Ambulance Sub-Station	Loan sanction granted by Minister of Housing and Local Government and tenders invited.
Gatwick Airport	Ambulance Sub-Station	Loan sanction granted by Minister of Housing and Local Government and tenders invited.
Merton	Ambulance Sub-Station	Approved in principle by Minister o Health. Site acquired and sketch plans and estimate being prepared
Tolworth	Ambulance Sub-Station	Approved in principle by Minister o Health and site being acquired.
Site at St. Lawrence's Hospital, Caterham	All age Training Centre for Sub- normals	Loan sanction granted by Minister of Housing and Local Government and tenders invited.
Site at Cassel Hospital, Ham	All age Training Centre for Sub- normals	Tender accepted. Building work not started.
Site at Walton-on-Thames	All age Training Centre for Sub- normals	Site acquired. Sketch plans and estimates being prepared.
75, Woodcote Road, Wallington	Hostel for Mentally Ill Persons	House purchased. Original scheme for adaptations, etc. withdrawn and new scheme being prepared by
95, Brighton Road, Sutton	Hostel for Adult Male Sub-normals	County Architect. Minister of Housing and Local Government following Public In- quiry upheld local objections, and new site being sought.
Ardquin, Hazel Grove, Hindhead	Hostel for Sub-normal Children	Project not to be proceeded with and to be replaced by adapting Send- hurst Grange, Send.
Woking	Extension of provision for care of unmarried mothers and their babies	Approved in principle by Ministry of Health. Sketch plans and esti- mates being prepared.
962-63 CAPITAL BUILDING PROGRAMME.		
King George's Hall, Esher	To improve and enlarge existing clinic premises.	Tenders invited.
Fattenham Crescent, Banstead	Welfare Centre/School Clinic	Approved in principle by Minister of Health. Site purchased.
Sanderstead	Welfare Centre/School Clinic	Approved in principle by Minister of Health. Negotiating for a site.
Old Dean Common Estate, Cam- berley	Welfare Centre/School Clinic	Approved in principle by Minister of Health. Site purchased.

Project.		Purpose.	Present Position.
1962-63 CAPITAL BUILI PROGRAMME—contd.	DING		
Oxted		Welfare Centre/School Clinic	Approved in principle by Minister o Health. Negotiating for a site.
Ashburnham Road, Ham		Welfare Centre/School Clinie	Approved in principle by Minister o Health. Site being acquired.
Giggs Hill Green, Thames	Ditton	Welfare Centre/School Clinie	Approved in principle by Minister of Health. Negotiating for site.
Warlingham—Sanderstead		Ambulance Sub-Station	Approved in principle by Minister of Health. Site being acquired.
Blindley Heath		Ambulance Sub-Station	Approved in principle by Minister of Health. Site acquired.
Woking		Ambulance Sub-Station	Approved in principle by Minister of Health. Site being sought.
Richmond		Ambulance Sub-Station	Site owned by Committee.
Guildford Training Centre		Prefabricated Work Unit to ease overcrowding	Loan sanction granted by Minister o Housing and Local Government.
Sutton Training Centre		Additional Workroom to provide better facilities	Approved in principle by the Minister of Health.
Weybridge Training Centre		Work Unit to ease overcrowding	Site or suitable premises being sought
Dorking Training Centre		Work Unit to cater for adults attend- ing Training Centres in the area	Site or suitable premises being sought
Sendhurst Grange, Send		Hostel for Sub-normal Children to replace the one proposed for Ardquin, Hindhead	County owned property. Planning permission granted and adaptations proceeding.
Hostel, West Molesey	*** ***	Purpose built Hostel for Adult Sub- normal Females	County owned site. Planning per mission being sought.
Wimbledon		W.V.S. Hostel for Confused Elderly Persons	Loan sanction for 50 per cent of cost granted by Minister of Housing and Local Government. Should be ready for occupation in 1962.
Wimbledon		Cheshire Foundation Home for Mentally Ill Persons	Loan sanction of 50 per cent of cost granted by Minister of Housing and Local Government. Should be ready for occupation in 1962.
Wallington		St. Bernadettes Society School for Mentally Handicapped Children	Loan sanction for 50 per cent of cost being sought.

Prevention of the Break-up of Families.

During the year Divisional Medical Officers held 81 Co-ordinating Conferences to discuss problem families. At the end of 1961, 362 families remained on the registers and they were classified as follows:—

Classification.	Problem Families.	Failing Families.	Families with Problems.	Total.
Having probably reached their own highest standard of behaviour but still require help and/or supervision	80	17	18	115
Improving	59	25	10	94
Improvement thought possible but not yet evident	54	22	19	95
Deteriorating	39	11	8	58
Number of families on registers 31.12.61	232	75	55	362
Families removed from divisional registers during 1961 :— (a) Problems resolved (b) Other reasons	46 39	29 18	22 8	97 65

These 362 families are all known to the Health Visitors for their districts and the latter in addition are giving special attention and support to a further 514 families which have not been considered by a Co-ordinating conference.

The number of children under school-age attached to these 362 problem families was as follows :--

In Part III Accommodation.	In Care.	Others (At Home, in Special Schools, etc.).	Total.
8	70	1,288	1,366

REHOUSING.

In about 11 per cent of the families dealt with it was felt that their problems would be largely overcome if they were suitably rehoused and 29 families were in fact rehoused.

SPECIAL HOME HELPS.

During 1961, problem families received the services of special home helps amounting in all to 4,942 hours. In addition, 4,684 hours of service were given to other problem families by ordinary home helps. The average number of families who were helped in this way was about 20 each quarter.

At the end of the year 31 special home helps were available for duty with problem and failing families. When working with these families they receive an extra 4d. per hour but at other times they are employed and paid as ordinary home helps.

FAMILY SOCIAL SERVICE.

The scheme for the provision of social workers in each of the health divisions of the County continued to expand in 1961. The establishment of social workers for the dual purpose of the prevention of the break-up of families and the care of chest cases (see work of chest clinics, page 49) remained at 17½.

The two-year course of weekly group discussions between the social workers and members of the Family Discussion Bureau, which terminated in July, proved invaluable as a forum for discussion of the most complex problems of human relationship which arose in the families with whom the social workers were actively engaged. Consequently, in October, with the co-operation of the Medical Director of the Cassel Hospital, Ham, a similar group was set up so that ten of the social workers could continue weekly discussion under the guidance of one of the consultant psychiatrists at the Hospital. The remainder of social workers continued to meet fortnightly for case discussion, together with the Care Organiser and Deputy Care Organiser.

The Deputy Care Organiser completed her training course in advanced case work with marital problems during 1961.

TRAINING HOMES.

Seven problem families were admitted to Frimhurst Recuperative Home at Frimley for training.

Recuperative holidays were arranged for three families at Frimhurst, four families at Lennox House, Southsea and three families at three other holiday homes.

Although the principal responsibility for the co-ordination of the work in connection with the prevention of the break-up of families rests with the Divisional Medical Officers, other County Officers and officers of district councils, together with the various voluntary and statutory organisations, are also associated with this work and my thanks are due to them for their close co-operation and assistance without which successful work in this field would be impossible.

Health Control at London Airport-Gatwick.

Gatwick airport is designated by the Minister of Health as a sanitary airport and the County Council are responsible for the enforcement of health control and for the medical examination of aliens. The arrangements whereby general practitioners and local authority medical officers are on call to carry out these duties were continued during the year and the Dorking and Horley Rural District Council acted as the Council's agents in providing facilities for disinfection, disinsecting and destruction of rodents: bacteriological investigations were carried out by the Public Health Laboratory at Guildford and Colindale, and vaccination against cholera and smallpox are provided at the airport and against yellow fever at Kingston-upon-Thames.

Staff Medical Examinations.

The medical supervision of all the Council's staff provided by the County Health Department covers:—

- (i) The scrutiny of the medical history sheets completed by all successful applicants to officer posts and servants who are outside superannuable age, together with any follow-up or medical examination deemed necessary (including x-ray reports and special tests such as vision and mantoux where required).
- (ii) Medical examination of all servants of superannuable age to determine their fitness for duty and eligibility for inclusion in the superannuation scheme.
- (iii) Medical examination of teachers appointed to Surrey schools and candidates for Teacher Training Colleges.
- (iv) Annual medical examination for ambulance driver/attendants upon their reaching 60 years of age.
- (v) Follow-up for cause and anticipated date of return to duty of personnel who have been absent from duty due to sickness for a long period.
- (vi) Medical examination of staff who are due to retire on pension and who wish to provide an annuity for their wives in the event of their pre-decease; those requiring medical examination under the firemen's pension scheme and those who may not be fit for further duty by reason of permanent ill-health.
- (vii) Medical examination of staff for other local authorities by mutual arrangement on a reciprocal basis.
- (viii) Annual re- x-ray examination of staff who work in contact with children.

The total medical reports and medical history sheets relating to staff received in the Department during the year number 2,622.

CARE OF MOTHERS AND YOUNG CHILDREN.

The main features of the Council's scheme for the care of mothers and young children remain as in previous years.

Notification of Births under the Public Health Act, 1936.

The following is an analysis of all births (live and still) notified during 1961 including any births registered but not notified and properly belonging to the County:—

ister	red	but not	no	tii	ie	d	an	id	p	ro	pe	rly	7 1	be	lo	ng	in	g	to	t	he	(Cot	un	ty	-	-			1						1	
No. of	Regis-	0		529	2000	452	742	561	886	1,133	0277	2008	010	400	260	0020	797	100	650	531	544	828	934	296	670	936	1,124	000	1,260			580	553	199	1,018	00 201	TOI SHOP
tside	within rict.	Hospital/ Maternity Home.		- 20	181	10	18	67.00	53	397	9	200	020	101	900	000	10	10	49	00	44	17.00	96	10	152	00	Re	508	989			50	100	2000	13	9.491	witton.
Number born outside	rmally resident with the County District.	Private Nursing Home.		25	122	20	1	133	00	49		- 0	0 10	10	-		1	1	00	01	11	1	1	1	6		0	14	01			1	1	0	11	164	***
Num	norma	At Home.		1	01	1	0.0	-	00	1	1	-	-	-	4 4		1	1	1	1	1	00	01	1	1	1	1 °	1	-			01	1	2 -		9.9	200
here in	within ict.	Hospital/ Maternity Home.		312	172	293	69	010	524	508	11000	38	000	15	93	180	10	65	201	279	358	423	265	06	321	2010	161	449	101			80	313	200	302	8 492	China
Number born elsewhere in Administrative County but	the County District	Private Nursing Home.		-	1	1	1	1	10	- 10	-	7	30	10	10	14	1	10	1	49	1	1	1	1	1	,	1.3	-	56			24 5	97	100	38	354	
Number	the C	At Home.		1	-	1	-	ı	1	1	-	1 1		1	1	1	1	1	-	1	1	1	1	1	i *	0	-	1	6.0			1	- 10		-	90	
	dent urrey.	Hospital/ Maternity Home.		1	1	1	48	1	1	1 20	021	14		78	2000	1	143	162	99	1	f	375	1	202	1	0	00	-	66			1117	1		11	1.597	
	and normally resident outside County of Surrey	Private Nursing Home.		1	1	1	1	1	1	1			-	1	1	1	28	1	1	1	1	1	1	1	1		-	744	1			1	1	1	11	782	
	and n outside	At Home.		1	-	1	-	1	_	- 0	4-	1	1	1	1	1	1	1	1	I	28	91	-	1	1			1	1		N.	1	1	,	Ţ	16	
STRICT	dent rey.	Hospital/ Maternity Home.		1	1	1	1,683	1	1	101	101	936		103	*	-	976	520	1,493	1	1	200	1	1,029		170	95	1	728		200	304			11	8.262	
NUMBER BORN IN COUNTY DISTRICT	and normally resident cleewhere in Surrey.	Private Nursing Home.		1	1	1	1	1	1	1 0	00	1	1	1	1	1	260	1	1	1	1	1	1	1	1		-	174	1			1	11		11	533	
R BORN IN	and n	At Home.		1	-	1	1	1	Dù.	1	,	1	0	1	1	1	1	1	00	1	28.5	91	1	20	1		1	1	1			1	11	0	1	231	
NUMBE	. d	Hospital/ Maternity Home.		1	1	1	516	1	1	1001	120	469	1	208	0100	1	169	68	422	-	13	182	100	690		987	316	-	657		100	123			11	4.802	
	and normally resident therein.	Private Nursing Home.		1	1	1	1	1	1	1 22	000		1	1	1	1	20	1	1	I	1	1	1	1			94	219	1			1	11		11	348	
	104 104	At Home.		198	178	149	139	550	2000	435	120	920	000	80	171	89	110	157	160	186	163	169	2000	200	010	896	176	133	433		00	000	900	106	109	6.121	
	COUNTY DISTRICT	AUTHORITY.	M.B. and Urban.	Banstead	Barnes	Beddington and Wallington	Carshalton	Caterham and Warlingham	Chorteey	edon and Furley		Epsom and Ewell		Farnham	Frimley and Camberley		***	Haslemere	Kingston-upon-Thames	Loatherhead	Malden and Coombe	Merton and Morden	man		5	nd Choam	12	Wimbledon	gui	Rural.		Doubling and Hodge.	dans trongs		Hambledon	Totals	
				Bans	Barn	Bedo	Carrel	Cate	Chortsey	Coulsdor	Poham	EDRO	Eaha	Farn	Frim	Goda	Guille	Hash	King	Loat	Mald	Mort	Mitcham	reignte	Surbiton	Smeet	Walt	Wim	Woking		Boschot	Though	Godstone	Guile	Ham		

The percentage of confinements taking place in hospitals was 68.2, in private nursing homes 4.6, and at home 27.2.

The following table shows in summary the comparable figures to those given in the previous table over the past thirteen years:—

Year.	At Home,	In Private Nursing Home.	In Hospital.	Total Registered Births L. & S.
	+	1,344 out-Coun	ty	
1949	4,950	2,410	10,807	20,066
1950	4,361	1,305	12,870	18,774
1951	4,012	1,091	12,963	18,224
1952	3,849	1,043	13,130	17,977
1953	4,073	969	13,382	18,524
1954	4,110	828	13,584	18,545
1955	4,248	789	13,821	18,639
1956	4,568	793	13,781	19,116
1957	5,073	767	13,790	20,000
1958	5,591	856	14,291	20,762
1959	5,753	797	14,320	21,053
1960	6,128	924	14,192	22,011
1961	6,174	1,045	15,495	22,731

From this table it is apparent that the main burden of the increased number of births in recent years has fallen on the domiciliary midwifery service; thus, taking as the base line the year 1952 which yielded the smallest number of births and the lowest number of home confinements since the end of the war, the increase in the number of home confinements has been 60.4 per cent and of hospital confinements 18.0 per cent. Unfortunately this is not the whole picture; as the number of hospital beds available for maternity cases in the County has not substantially increased over that period, the only way in which the increased demand could be met has been by early discharge of maternity patients and over the past six years, the number of early discharges in the nine Divisions in the County has been as follows:—

Division.		1956	1957	1958	1959	1960	1961
North-Western		90	114	114	158	199	283
Central		44	57	67	97	102	119
North-Central		36	66	167	172	205	109
Southern		57	69	82	72	135	175
South-Eastern		27	62	59	72	158	170
Northern		14	17	31	38	51	44
South-Western		277	166	160	260	380	365
North-Eastern	***	40	49	69	88	123	141
Mid-Eastern		20	37	48	34	87	64
Totals		605	637	797	991	1,440	1,470

It is apparent that the steps taken in 1960, and which were referred to in my Report for that year, have been successful, for the time being at any rate, in checking the growth of this retrograde practice, but the prospects for the future are disquieting. In the years towards the end of, and immediately after the last war, the number of births and the birth rate showed a sharp rise: girls born during this "bulge" will be reaching child-bearing age in the next few years and it is therefore to be expected that a further increase in the number of births will occur. The Ten-Year Hospital Plan envisages substantial increases in the number of maternity beds, and by 1975 it is anticipated that there will be sufficient maternity beds for 70 per cent of confinements, for a stay of ten days after confinement in the normal case and for ante-natal beds at the rate of seven per 1,000 total births. In the meantime there seem to be two main methods of meeting the need, viz., (i) by more strict selection of cases for hospital confinement or (ii) by an increase in the practice of early discharge.

As regards the former, attention is drawn to the table on page 23. From this it is apparent that in 1960 (the latest year for which the figures are available) 92.49 per cent or 8,260 of primiparae, 56.98 per cent or 6,684 low parity mothers and 58.19 per cent or 650 high parity mothers were confined in hospitals. The highest risk of complications during confinement is borne by the high parity mothers and the lowest risk by the low parity mothers with the risk to primiparae intermediate between the two. Yet the proportion of high parity mothers confined in hospital is almost the same as for low parity mothers; this must be regarded as a serious defect in the present practice of admissions for hospital confinement. It is clear from the figures that only a slightly more strict selection among low parity mothers would enable a much higher proportion of high parity mothers to be admitted and indeed could also be expected to cope with the increase in the number of births where hospital admission is considered desirable.

One of the arguments commonly adduced in favour of boosting the number of hospital confinements is that in the advent of an emergency arising in the course of the confinement, the services of a consultant and all the necessary facilities for dealing with the emergency are available; and it is interesting in this regard to consider how many admissions for emergencies occurring in the course of labour do become necessary among cases booked for domiciliary confinement. In Surrey in 1961, 118 mothers were transferred to hospital during the course of labour or immediately after it because of some development or complication considered to make this necessary (complications occurring in the last weeks of pregnancy or premature onset of labour from whatever cause are not included as these would occur also in cases booked for hospital confinement and would similarly involve rapid transport to hospital); this figure compares with a total of 6,158 domiciliary confinements and represents about 1.9 per cent of such births.

As regards the second alternative, viz., earlier discharge, I referred in my Report for the year 1960 to the need for continuity of obstetric care. It seems clear that the practice of early discharge places a heavy burden on the hospital midwife who thereby has to deal with more confinements and at the same time makes the task of the domiciliary midwife who takes over the case during the puerperium in establishing relations of mutual confidence with the mother more difficult; it divides the responsibility in instructing in mothercraft between the hospital and the domiciliary midwife; and finally reduces the attractiveness of the post of midwife and therefore may affect adversely recruitment to a branch of the profession which is already not popular among nurses.

It is likely that a proportion of early discharges will continue to be necessary until the provision of additional maternity beds is accomplished but the practice should at any rate be limited to those cases where the interests of mother and child are least seriously affected and in my Report for 1960, I quoted the views of the Professional Advisory Committee on the Maternity Services as to the proper control of such discharge in the following terms:—

"It might be necessary to shorten the stay in hospital under special circumstances and in individual cases and if this became necessary the following procedure was commended:—

- (i) If early discharge is decided on, the patient should be discharged on the second or third day rather than later in the puerperium so as to secure as much continuity of nursing care during the puerperium as possible and, in particular, to secure continuity during the establishment of breast feeding.
- (ii) Cases considered for early discharge might include patients who had been delivered of a stillborn child or home booked cases admitted to hospital for emergency reason whose confinements proved to be normal.
- (iii) Cases admitted for social reasons and because of unsuitability of home circumstances should not, under any circumstances, be discharged early.
- (iv) In all cases where early discharge was contemplated, it is essential, in addition to the usual notification to the general practitioner, for the divisional office of the local health authority to be given as much warning as possible so that the necessary arrangements can be made to provide any domiciliary services which may be required."

Live births by age and parity of mother and by place of occurrence

The following table shows the live births during the six years 1955-1960 analysed by age and parity of mother and place of occurrence.

	TOTAL.		18.396	8.86	19.639	20,455	20,690	21,778
		Other.	86 67 67 160	28.2 2.2	E 88 1 12	96 76 6 180	88 6 6	110 14 201
	ALL.	At Home.	2,659 707 7.131	2,818 816 816 10 4,426	975 3,190 814 8 4,987	1,027 3,615 852 7 5,301	1,058 3,753 843 5,662	1,201 3,891 888 3 5,983
	V	Other Hosp.	209 658 181 5 1.053	213 677 203 1,093	256 690 209 4 4 1.159	255 255 255 1,259	350 7111 214 2 1,277	396 797 220 4 1,417
		N.H.S. Hosp.	4,145 7,099 1,787 13,052	4,304 7,069 1,772 13,162	4,446 7,019 1,814 20 13,299	4,695 6,986 1,817 17 13,515	4,728 6,940 1,852 20 13,540	5,000 7,242 1,926 9 14,177
		Other.	101 1 104	1-014	11717	11111	11111	- 03 00
	over.	At Home.	220 220 220 530	231 231 504	14 203 203 490	269 176 	10 273 199 485	264 191 191 464
	4 and over.	Other. Hosp.	118	121 82	123 120	128 14	35.22	38 25 25 25 25 25 25 25 25 25 25 25 25 25
		N.H.S. Hosp.	190 223 	176 212 395	233 238 11 18 18	186 241 843 843	242 255 255 255 206	265 307 307 578
		Other.	39 27 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7	8184 5	38.4	8 2 cd 88	36 60 101	25. 108 108
f Mother.	9	At Home.	2,121 456 456 3,102	2,300 550 7 3,385	689 2,658 573 5 3,925	3,040 644 644 644 644	3,201 618 4 4,606	3,358 668 668 4,938
† Parity of Mother.	1-3	Other Hosp.	66 414 135 	150 150	80 449 147 680	83 500 168	112 467 143 723	130 528 154 814
		N.H.S. Hosp.	1,018 3,809 1,101 8 5,936	990 3,516 1,118 5,629	979 3,388 1,065 4 5,436	1,035 3,326 1,145 4 5,510	1,098 3,336 1,098 7 5,539	1,214 3,512 1,142 5,870
		Other.	87 78	152,101	30 8 6	25.4 25.9	288 1 10	19 68
	0	At Home.	222 243 31 31 499	03 01 00 04 05 05 17 05 05 15 05 17 05 17 05 05 17 05	38 38 572 572	275 306 32 1 614	265 279 26 1 571	283 269 29
		Other Hosp.	143 226 29 29 5 403	163 237 32 432	35 35 428	225 225 225 4 63	222 36 36 1 496	264 233 32 32 531
		N.H.S. Hosp.	3,120 3,100 463 13 6,696	3,307 3,377 442 7,138	3,459 3,397 511 15 7,382	3,647 3,474 431 10 7,562	3,622 3,362 499 1,495	3,781 3,465 477 6 7,729
			11111	11111	11111			11111
Age Group.			Under 25 25-34 35 and over Not stated Total	Under 25 25-34 35 and over Not stated Total	Under 25 25.34 35 and over Not stated Total	Under 25 25.34 35 and over Not stated Total	Under 25 25-34 35 and over Not stated Total	Under 25 25-34 35 and over Not stated Total
Year.			1955	1956	1957	1958	1959	1960

† Number of previous live-born children.

Expectant and Nursing Mothers.

The following table shows the work undertaken at the ante- and post-natal clinics during the year.

Division.	Number of premises in use at end of year (whether held at	sessions	number of held per iring year.		f Women in dance.	Total number during t	of attendances he year.
	Child Welfare Centres or elsewhere).	Medical Officers' sessions.	Midwives' sessions.	Number of Women who attended during the year.	Number of new cases included in Col. (4).	Medical Officers' sessions.	Midwives' sessions.
(1)	(2)	0	3)	(4)	(5)	(6)
Clinics for Ante-Natal	1		1		1		
Examination.							
North-Western	11	33	21	934	695	1,980	1,623
Central	9	32	30	2,520	1,833	5,733	5,644
North-Central	11	36	30	2,029	1,423	4,871	3.112
Southern	- 0	10	-	81	58	271	_
South-Eastern		10	20	519	319	816	1,711
Northern	5	21	18	1,410	1,071	3,510	2,259
South-Western		8		403	403	2,620	_
V 17							
North-Eastern—			6	870	284	545	715
Wimbledon		8	8	378			715
Merton & Morden		12	-	274	192	1,172	1.000
Mitcham	3	16	8	813	695	2,016	1,893
Mid-Eastern—				-	200	* 000	
Carshalton		16	-	282	158	1,088	350
Beddington & Wallington	1	4	Total .	150	105	524	
Woking	5		19	667	418		1,829
Total	63	206	154	10,460	7,726	25,146	18,786
Clinics for Post-Natal							
Examination.							
North-Western	9	33	4	109	109	91	36
Central		32		321	297	349	
North-Central		36	30	369	365	389	
Southern		10		27	26	29	-
South-Eastern		10	20	58	58	71	1-
Northern		21	20	297	297	305	
South-Western	- 0	8		206	206	206	322
North-Eastern—				200	200		
Wimbledon	3	8	8	6	-6	10	1
Merton & Morden		12	0	9.0	99	99	-
Mitcham		3		37	37	37	
Mid-Eastern—	0	9	10000		01		
Claudialtan	4	16	-	27	27	28	-
Beddington & Wallington	1	4		12	12	12	1
Walson	2	:		12	12	1.0	
Woking	-						
Total	55	193	62	1,491	1,462	1,549	36

[†] Separate post-natal clinics are not held, cases being seen at ante-natal clinics and the figures refer to sessions held and women examined post-natally at ante-natal clinics.

Ante-natal clinics are provided throughout the county by the County Council; each is in charge either of an obstetrician, a general practitioner with special experience, or a full-time assistant medical officer. Certain hospitals in the county also run ante-natal clinics in association with their maternity departments, and the obstetricians in charge of such clinics are available to see also expectant mothers referred from the County Council's ante-natal clinics. Good co-operation with hospital maternity units is essential and reports on home conditions are provided to hospitals in order to assist them in the careful selection of cases which require hospital confinement. It has also been possible at one hospital for the health visitors to be attached to the ante-natal clinics resulting in a still closer integration of the two services. The value of close liaison between the various bodies responsible for the maternity services has also been demonstrated in regard to the prevention of toxaemia of pregnancy and procedures aimed at reducing the incidence of toxaemia have been mutually agreed.

Educative talks and discussion groups on subjects related to pregnancy and the confinement and to parenteraft are becoming increasingly a feature of the work of the clinic and experience shows that they are usually most successful when associated with the work of the ante-natal clinics and with the relaxation classes.

^{*} Figures included in figures for N.W. Division.

Total figures relative to ante-natal sessions and attendances over the thirteen-year period since the inception of the National Health Service are as follows:—

Year.	Number of Sessions per Month.		Number o		Number of Attendances.				
1 car.	Medical Officers.	Midwives.	First time in the year.	All cases.	Medical Officers' sessions.	Midwives sessions.			
1949	1	56	9,2	94	38.	467			
1950	2	233	8,9		35,507 34,831				
1951	9	220	8,1	97					
1952	2	209		23	33.	348			
1953	206	1 45	5,748	7,538		521			
1954	202	79	6,123	8,248	29,948	7,936			
1955	198	73	6,009	7,986	30,430	6,941			
1956	201	74	5,666	7,571	28,593	7,659			
1957	199	84	6,277	8,927	29,334	9,161			
1958	202	90	6,457	8,833	29,475	10,669			
1959	197	115	6,963	8,975	28,995	13,055			
1960	209	132	7,445	9,582	28,441	17,196			
1961	206	154	7,726	10,460	25,146	18,786			

It will be seen that the number of women attending and the attendances at the ante-natal clinics, having fallen appreciably in the first years of the National Health Service, are now again increasing. There is no doubt that the work of the ante-natal clinics has changed greatly in recent years, that much more emphasis is now put on their educative function and that expectant mothers appreciate the services they offer.

I must again refer to the poor attendances by mothers for post-natal examination. This is particularly unfortunate, having regard to the high incidence of gynaecological ailments or disabilities directly attributable to child bearing. It is, of course, possible that many women go to their general practitioner for post-natal examination, but the numbers who at a later stage come to the gynaecological departments of the hospitals, suggest that many are not so seen.

Unmarried mothers and the care of illegitimate children.

In making provision for the care of the unmarried mother and her child the County Council rely in the main on voluntary Homes for unmarried mothers and particularly on Homes established in the County and receiving grants from the Council. During the year, 166 Surrey cases were admitted to mother and baby homes, and 26 Surrey cases were admitted to Shelters provided by Voluntary Organisations receiving a grant from the Council while 82 cases were sent by the Council to other Homes, payment being made per capitum.

In addition, 61 cases were admitted to the hostel provided by the County Council at Dorincourt, Woking, for the reception of expectant and nursing mothers who are unmarried or who are in need of residential accommodation. Residence in these hostels is normally for two months before and two months after confinement and mothers are assisted to find employment on leaving the hostels and in making arrangements for the care of their babies.

Maternity outfits.

A maternity outfit is supplied free, on request, to each expectant mother being confined at home who makes use of one or other of the arrangements for the care of expectant mothers under the National Health Service.

Maternal mortality.

The total maternal deaths assigned to the County in 1961 was seven, which gives a maternal mortality rate of 0.31 per thousand live and still births which is less than the rate of 0.33 for England and Wales. A comparison with previous years will be found under "Vital Statistics" on page 6.

All of the deaths actually occurred in the County. Five cases were confined in hospitals, two at home and six died in hospital. One, a case of rupture of bicornuate uterus due to pregnancy (not delivered), died at home.

Puerperal pyrexia.

During 1961, 425 cases of puerperal pyrexia were notified representing an attack rate of 18.69 per thousand live and still births as compared with 10.17 for England and Wales. Of these cases 43 occurred in domiciliary confinements and the remainder in institutional confinements. The difference in the notification rates in domiciliary and in institutional confinements is notable being 6.96 in domiciliary practice and 23.10 in institutional practice (including hospitals and private nursing homes).

Infant mortality.

The infant mortality rate in the Administrative County of 17.79 compares with 21.4 for England and Wales. The heaviest incidence of deaths of children under one year is, as always, within the first four weeks of life (neo-natal mortality). A table giving certain figures relating to the infant mortality rates in recent years in England and Wales and in Surrey will be found under "Vital Statistics."

The urban infant mortality rate in 1961—namely 18.0 (349 deaths)—is higher than the rural rate—namely 16.79 (50 deaths).

Prematurity.

The following table gives details of premature births and still births notified in the County during the year 1961 as adjusted by transferred notifications:—

						I	REM/	ATUR	E LIV	E BI	RTH	s.					777	EMAT STILL IRTE	-
	Weight at birth.		†Born in Hospital.						Born at home and transferred to hospital on or before 28th day.			me a me a ed ent there.	irely	Born in nursing home and transferred to hospital on or before 28th day.			Born		
		Total.	24 hrs. of birth.	Survived 28 days.	Total.	924 hrs. of birth.	Survived 28 days.	Total.	S24 hrs. of birth.	Survived 28 days.	Total.	Died within 1924 hrs. of birth.	Survived 28 days.	Total	Died within 524 hrs. of birth.	Survived 28 days.	Born in hos- pital	Born at home	Born in nurs- ing home
_	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)
(a)	3 lb. 4 oz. or less (1,500 gms. or less)	139	66	44	7	6	1	5	2	1	-	-		1	-	-	63	8	1
(b)	Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 gms.)	219	31	171	11	_	10	13	1	11	11	1	9			_	47	2	1
	Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 gms.)	246	8	234	35	-	34	5	_	4	7	_	7	1		1	13	2	1
(d)	Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 gms.)	493	8	474	124		124	7		5	28		27		1		26	1	1
-	Totals	1097	113	923	177	6	169	30	3	21	46	1	43	2		1	149	13	4

[†] The group under this heading will include cases which may be born in one hospital and transferred to another.

This table emphasises the serious loss of infant lives associated with prematurity. The size of the problem can most simply be shown as follows:—

		•		TOTAL	NON- PREMATURE	PREMATURE
Live births	 ***			22,423	21,071	1,352
Deaths among month of life	births	in the	first	298	103	195
Still births	 ***	***		308	142	166

^{*} The Ministry of Health's definition of a premature birth is one when the infant at birth weighs 54 lbs. or less.

It will be seen that the 21,071 non-premature live births produced 103 neo-natal deaths and the 1,352 premature live births produced 195 neo-natal deaths. In addition half the still births are associated with prematurity. Unfortunately the figures for the last ten years give no indication of any decrease in the incidence of premature births.

Ophthalmia Neonatorum.

In 1961 midwives sought medical aid for suspected cases of ophthalmia neonatorum in respect of 69 babies and 8 cases were notified by medical practitioners as suffering from ophthalmia neonatorum.

The case rate (i.e., the number of notified cases per thousand live births) was 0.36.

Of the 8 cases notified by medical practitioners 7 occurred in the practice of midwives. Six were treated at home, 2 in hospital, and in no case was vision impaired.

Infant Welfare Centres.

The County Council maintained 194 infant welfare centres in the year the same number as for 1960. An additional centre was started at St. Peter's Church Hall, Woodmansterne and the centre at All Saints Church Hall, Leatherhead was closed during the year.

The following table shows the attendance at the centres for the year 1961:-

Marie and Marie	Number	Number of Child	Number of children who first attended a centre of this Local Health	attende	er of childred during the	the year	Total number	atte the chi the	Number of ndances di year made ldren who date of atte ance were:	aring by at end-	Total
Division.	of centres provided at end of year.	Welfare sessions now held per month at centres in col. (2).	Authority during the year, and who at their first attend- ance were under 1 year of age.	1961.	1960.	1959-56.	children who attended during the year.	Under 1 year.	1 but under 2.	2 but under 5.	attend- ances during the year.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)
North-Western Central North-Central Southern South-Eastern Northern South-Western North-Eastern Wimbledon Merton & Morden Mitcham Mid-Eastern Carshalton Beddington & Wallington	35 25 16 28 20 7 41 5 4 5	135 126 95 96 70 42 133 34 32 28 34	3,879 2,860 2,717 1,852 1,967 1,157 2,675 798 667 942 642 459	4,337 3,076 2,478 1,560 1,401 1,035 2,315 824 596 999 520 398	3,412 2,897 2,425 1,653 1,386 859 2,281 766 577 624 694	3,730 4,756 3,006 2,088 1,958 850 3,549 1,552 1,113 638 1,471	11,479 10,729 7,909 5,301 4,745 2,744 8,145 3,142 2,286 2,261 2,685 1,271	49,947 49,929 38,252 23,678 22,888 15,291 39,905 14,532 11,549 14,571 10,347 5,514	10,081 14,969 7,660 6,928 5,986 2,795 14,022 3,683 3,501 2,023 2,613 1,823	8,925 17,375 6,181 6,661 5,341 1,337 14,144 4,231 4,192 1,035 3,879 1,737	68,953 82,273 52,093 37,267 34,215 19,423 68,071 22,446 19,242 17,629 16,839 9,074
	194	841	20,615	19,539	17,928	25,230	62,697	296,583	76,084	75,038	447,525
Voluntary. Southern SW (Army School of Health) S.C.C. Health Visitor attends (Discontinued 1.12.1961)	1	1	26	19	23	30	72	210	62	58	330
	1	1	43	31	39	45	115	361	92	80	533

It will be noted that the number of children attending the centres in 1961 and who were born in that year formed 87.18 per cent of the total live births in the year. The average number of attendances of these children in the year was fifteen.

The number of children attending, the proportion of live births in the year who attended welfare centres and the number of attendances at infant welfare centres over the past thirteen years, together with the number of registered live births is as follows:—

Year. Registered under 1 year who attended for first time.		Total number of children attending in the year.	Total attendances of all children in the year.	Proportion of Live Births in the year who attended Welfar centres (%).	
1949	19,668	15,662) (344,715	1
1950	18,386	14,012	Not	355,671	Not available
1951	17,841	14,437	available	356,333	Cast available
1952	17,633	14,234	j l	366,585	
1953	18,187	14,862	49,348	367,333	75.31
1954	18,193	15,119	49,370	374,329	76.58
1955	18,305	15,191	48,717	374,459	78.02
1956	18,794	16,195	49,905	382,002	77.07
1957	19,627	16,946	52,110	402,309	77.37
1958	20,398	18,375	52,794	400,489	79.37
1959	20,725	18,611	55,211	409,644	81.23
1960	21,675	19,660	58,722	422,467	85.50
1961	22,423	20,615	62,697	447,525	87.18

The holding of parenteraft circles has extended greatly during the year and these continue to be very popular. Such topics as home accidents, behaviour difficulties of the toddler, childish ailments that can be dealt with at home are discussed at the meetings. Some evening sessions have been held and the attendance has been good. The fathers have appreciated the opportunity of attending brains trusts and discussion groups.

Convalescent Treatment.

Expectant and nursing mothers and children under five recommended for convalescent treatment are sent to convalescent and holiday homes. During the year 66 children under the age of five years and 21 mothers and babies were sent for convalescence. Patients sent under this scheme are normally required to pay a standard charge towards their maintenance.

Day Nurseries.

At the end of the year there were 12 day nurseries with a total number of 518 places.

Admission is restricted to the following priority classes :-

- (i) Where the mother is the sole wage earner.
- (ii) Where there is sickness in the family or where home conditions likely seriously to prejudice the health of the child exist.
- (iii) Where, upon consideration of individual circumstances, it appears to the Council that admission is necessary in the interests of the child.

Voluntary Inspection of Children under Five Years of Age.

Special toddlers' clinics are held in some areas at which children under school age are, with the consent of the parents, given a routine medical examination at the ages of 2, 3 and 4 years, and, if necessary, treatment. Elsewhere, such examinations are undertaken at ordinary welfare clinics. Children at day and residential nurseries and nursery schools are also medically examined at routine intervals.

Distribution of Welfare Foods.

The scheme for the distribution of welfare foods for which the County Council became responsible in July, 1954, continued during the year, and the County Council were fortunate in still having the services of the W.V.S. whose help in staffing the distribution centres was greatly appreciated.

The following issues were made during 1961:-

Na	tional Dried	Milk.	Cod Liver Oil.		A. & D. Tablets.		Orange Juice.		
Free.	2/4	5/-	Free	1/-	Free.	6d.	Free.	5d.	1/6
2,717	150,689	5,006	48,773	12,600	47,527	22,587	3,758	375,090	172,121

Non-coupon issues to Hospitals and Nurseries :-

			National Dried Milk.	Cod Liver Oil	A. & D. Tablets	Orange Juice.
Hospitals	 	 	 1,617	40	29	3,514
Nurseries	 	 	 30	948	-	1,258

Number and type of distribution points at end of the year :-

- (a) Maternity and child welfare centres 172
- (b) Others 72

Audiological Service.

The audiological service for the ascertainment and subsequent treatment of pre-school and school children found to be deaf or partially deaf now consists of :—

- (i) Screening of pre-school children. Almost all health visitors in the County have now received special instruction in the application of screening tests for impaired hearing and are available to test children in the vulnerable groups either in the clinics or in the child's home.
- (ii) Routine testing of six-year-old school children. The testing is carried out in the schools by three audiometricians and in addition certain groups of handicapped children, e.g., children suffering from speech defects, cerebral palsy and educationally retarded children are also reviewed.
- (iii) Diagnosis, training and parent guidance. Children failing the screening tests are referred to one of the diagnostic clinics established within the County staffed by a medical officer, teacher of the deaf and audiometrician and, if deafness is confirmed, the opinion of an otologist is sought.

Training of the deaf child and parent guidance are given either in the home or at the clinic by the teachers of the deaf, supplemented where necessary by help from the medical and nursing staff. Three peripatetic teachers are employed in this work and the services of an educational psychologist (who is also a teacher of the deaf) are available when required.

As the majority of the health visitors on the staff have received instruction in the application of screening tests for impaired hearing, it was decided from the 1st January, 1962, to extend these tests to all children in the County when they reach the age of seven months. The extension of screening tests for impaired hearing should result in the ascertainment of more deaf and partially-deaf children at an earlier age. Although the majority of deaf and partially-deaf children come from the "at risk" groups, some thirty to forty per cent of children with impaired hearing arise from the non-vulnerable groups and their discovery may be delayed if they are not screened. It is not intended, however, that the register of the "at risk" groups should be discontinued. These babies fall into well-defined categories, usually babies who have been subject to adverse influences in their pre-natal, peri-natal and post-natal periods, and they are likely to produce not only deaf children but children with other handicaps, such as cerebral palsy and mental retardation. Their follow-up throughout infancy by the Assistant Medical officers is of special importance, particularly in checking their ability to hear and use all the sounds of speech at two to two-and-a-half years.

The following table shows the number of children ascertained through screening tests during the year :— $\,$

No. carried over as not fully to have fully assessed by hearing. hearing loss. No. found to have impaired fully fully normal remediable necessitating assessed by hearing loss. hearing and auditory training.	0-2 2-5 0-2 2-5 0-2 2-5 0-2 2-5 0-2 2-5	1 5 5 16 - 1 2 1 3 11	2 1 23 30 - 2 1 1 12 4	1 1 10 5 1 3 13	11 19 - 2 - 1 2	1 - 8 21	- 6 21 - 3 3	3 2 9 16 3 1	1 1 2	1 1 2 1 1	_ 1 6 14	1 3 - 1 - 1	25 - 64 45 - 45 -	34 10 152 156 — 11 4 6 67 24
No. of new cases referred to Audiology Clinic from all sources.	0-2 2-5	9 24	34 36	12 18	12 21	5	6 24	9 15	5 10	5 6	6 14	8	+	109 192
No. of children tested by Health Visitors.	0-2 2-2	233	248	316 —	129 —	- 615	132 —	342 28	- 691	- 65	1	100	- 89	2,082 28
No. of children "at risk" referred for screening during 1961.	0-2 2-5	434 118	613 47	305 23	211 13	219 13	155 24	365 29	172 8	- 88	87 6	145 29	- 88	310
	9	*							u			- 1		538865
Division.		North-Western	Central	North-Central	Southern	South-Eastern	Northern	South-Western	North-Eastern— Merton/Morden	Mitcham	Wimbledon	Mid-Eastern— Carshalton	Beddington/Wallington	Total

DENTAL CARE OF MOTHERS AND YOUNG CHILDREN.

In accordance with the provisions of Section 22 of the National Health Service Act, 1946, dental inspection and treatment of expectant and nursing mothers and children under five years of age was carried out by the Council's staff of dental officers who, while primarily engaged in the School Dental Service, devoted a part of their time to the care of mothers and young children. Patients were referred by medical officers, health visitors and midwives and some were treated following personal application.

The actual time occupied in the inspection and treatment is assessed as the equivalent of 1,393 sessions and the number of attendances made by patients was 9,396. The number of new patients attending during the year was 2,836 of which approximately 67 per cent were pre-school children.

Dental X-rays were available at eighteen clinics throughout the County. Dentures for mothers were provided through the County Dental Laboratory and to a lesser extent by outside contractors.

Increased attention was given to dental health education and individual and group talks were given by members of the staff and the oral hygienist. Health visitors have generally devoted one session in mothercraft classes to dental health in which the importance was stressed of an adequate and properly balanced diet to help the foundation of sound teeth. Fuller use was made of films and film strips and leaflets dealing with oral hygiene and diet were distributed. Coloured posters illustrating the various aspects of dental health were displayed in clinic waiting rooms.

The appended tables give details of work undertaken during the year under review.

(a) Numbers provided with dental care.

	Examined,	Needing treatment.	Treated.	Made dentally fit.
Expectant and Nursing Mothers	1,123	1,092	944	600
Children under 5	3,141	2,426	1,935	1,380

(b) Forms of treatment provided.

				Crowns or inlays.	Extrac- tions.	General anses- thetics	Dentures provided.		
	Scalings and gum treatment.	nd gum Fillings.	Silver nitrate treatment.				Full upper or lower.	Partial upper or lower.	Radio- graphs.
Expectant and Nursing Mothers	. 478	1,816	8	16	928	128	151	135	78
Children under 5	3	3,217	1,129	-	1,436	703	-	-	9

DOMICILIARY MIDWIFERY AND HOME NURSING.

During 1961 the number of cases attended by home nurses was less than the previous year and the total number of visits paid to them also showed a reduction. There was, however, an increase in the demand for the services of the domiciliary midwives both for confinements in the home and to deal with the increasing number of mothers and babies who are discharged home from hospital before the tenth day.

It has not yet been possible to recruit nursing staff up to full establishment but an improvement in numbers was secured largely through the increasing use of part-time nurses.

(a) Analysis of Nursing Cases.

In my Annual Reports for 1958 and 1959, an analysis of the cases attended by the district nurses by condition and by age group has been given. The figures for 1961 show that there has not been any notable difference in the general distribution of the work.

During the year further steps were taken to improve the position of housing accommodation for nurses and midwives and properties were purchased.

(b) Refresher Courses for Midwives, District Nurses and Health Visitors.

The requirements of the Central Midwives Board that midwives should attend approved refresher courses every five years was met by sending 24 midwives to courses at Kingston-upon-Hull, Westeliff-on-Sea, Oxford, Bangor, Exeter and Hastings. In addition, both district nurses and health visitors were given the opportunity of attending national courses run by professional organisations or the course organised by the County Council at Glyn House, Ewell.

(c) Training of Student District Nurses and Pupil-Midwives.

A number of Nurses' Homes and individual midwives in the County accept Part II pupil-midwives for district training by an arrangement with the Part II training schools in the County. District nurse training is organised through the Queen's Institute of District Nursing and suitable candidates are sent to the Guildford and Surbiton Training Homes. The theoretical instruction laid down in the syllabus of the Queen's Institute is given in the training unit in the Surbiton Home.

During the year thirty candidates were selected to take the course.

The arrangement whereby student district nurses employed by other authorities attend the lectures provided by the County Council as part of the district nurse training was continued during the year. Fifteen students sponsored by Croydon C.B.C. and two students from Brighton C.B.C. attended the lectures the sponsoring authority being responsible for all costs.

(d) Work of the District Nurses.

At the end of the year there were 298 full-time and 70 part-time nurses and midwives available for duty.

The work of the district nurses during the year 1961 was as follows :-

Division.	Medical.	Surgical.	Infectious Diseases.	Tuber- culosis.	Maternal complica-	Others.	Totals.	Patients included in (2)-(7) who were 66 or over at the time of the first visit during the year.	Children included in (2)-(7) who were under 5 at the time of the first visit during the year.	Patients included in (2)-(7) who hav had more than 24 visits during the year.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(0)	(10)	(11)
Number of cases attended by Home Nurses during the year:—							a relati			100
North-Western	1,849	335	6	27	18	5	2,240	1,398	81	447
Central	3,319	356	3	32	20	34	3,764	2,467	72	943
North-Central	3,042	647	10	21	56	9	3,785	2,324	96	978
Southern	1,722	372	2	25	20	24	2,165	1,463	97	397
South-Eastern	1,103	191	ĩ	28	13	26	1,362	875	33	329
NY -11	1.694	146	î	9	4	1	1,855	1.145	24	483
South-Western	2,541	494	21	11	22	292	3,381	1,849	144	714
North-Eastern—	2,511	404		4.1		202	0,001	1,010		173
Merton & Morden	675	110		8	2	2	797	661	7	284
3.674 3	742	104	1	24	ĩ	4	876	578	9	278
7777 1.1 1	693	75		9	2	2	781	463	35	251
Mid-Eastern—	033	10			-	-	101	200	30	201
Beddington &										
	559	74	1	18	1		653	392	23	203
Wallington	423	136	1	23	4		586	343	3	216
Carshalton	769	149		10	3	19	950	567	99	410
Woking	100	140		10	0	19	990	901		410
	19,131	3,189	46	245	166	418	23,195	14,525	646	5,933
Number of visits										
paid by Home Nurses during the			un and				12001			
year : North-Western	99.070	2.200	700	1.100	0.7	201	49 454	20.407	411	20.055
0-4-1	33,872	7,762 13,126	30	1,162	87 126	561 259	43,474	32,405	411 569	30,655 83,385
NT (1 (1) 1	90,367 81,157	15,679	53	909	375	58	105,056 98,231	78,363 74,815	960	77,938
	37,339	7,057	2	932	123	1,103	46,556	35,921	512	26,386
0 - 1 11 - 1	27,678	4,384	4	1,249	100	236	33,651	24,986	195	26,380
NT 13	47,443		7	463	22		55,178		349	
OL OF THE .		7,188			96	55		44,044		43,292
North-Eastern—	66,496	14,006	176	670	20	3,368	84,812	63,979	587	62,403
Merton & Morden	25,939	3,590		626	10	617	90 700	99 410	37	05 447
A COLUMN TO A COLU	23,876	3,816	153	1,297	12		30,782	23,419 20,739	1,000	25,447 23,468
WART TO A CO.		3,810	103	693	6	96	29,250		427	22,184
Wimbledon Mid-Eastern—	24,237	3,067		093	0	41	28,044	20,287	167	22,184
Beddington &										
N. S.	16 990	1 077	3.5	1 000	9.1		10 000	19 970	101	15 941
Wallington	16,239	1,677	15	1,287	31	-	19,260	13,879	121	15,341
Carshalton	16,645	2,699		466	5	200	19,815	15,410	49	14,538
Woking	15,449	2,707	-	721	62	293	19,232	12,771	167	14,349
	506,737	86,758	479	11,614	1,055	6,687	613,341	461,018	4,560	465,499

Attention is again drawn to the high proportion of the nurses' time which is spent with the over 65 age group. In 1961 62.6 per cent of the patients and 75.02 per cent of the visits were applicable to this age group.

Local Supervising Authority (Midwives).

The County Council, as the Local Supervising Authority, are responsible for supervising the work of midwives throughout the County. The supervisory staff comprises a medical officer on the Central Office staff and seven non-medical supervisors.

NOTIFICATION OF INTENTION TO PRACTISE.

The number of State Certified Midwives who gave notice of their intention to practise as a midwife during 1961 was 612.

	NUMBER	OF DELIVE	DURING T	DED BY MID HE YEAR.	WIVES IN	THE AREA
		D	Comiciliary Cas	es		1
	Doctor n	ot booked.	Doctor	booked.		
(1)	Doctor present at time of delivery of child,	Doctor not present at time of delivery of child.	Doctor present at time of delivery of child (either the booked Doctor or another).	Doctor not present at time of delivery of child.	Totals.	Cases in Institutions,
(1)	(2)	(0)	(4)	(9)	(0)	(1)
(a) Midwives employed by the Authority	27	200	2,139	3,803	6,169	-
(b) Midwives employed by Voluntary Organisations:— (i) Under arrangements with the Local Health Authority in pur- suance of Section 23 of the National Health Service Act, 1946	_	_	_	_	_	_
(ii) Otherwise (including Hospitals not transferred to the Minister under the National Health Service Act)	_	_	_	_	_	1,172
(c) Midwives employed by Hospital Management Committees or Boards of Governors under the National Health Service Act	_	_	_	_	-	14,161
(d) Midwives in private practice (including midwives employed in Nursing Homes)	4	2	15	1	22	196
Total	31	202	2,154	3,804	6,191	15,529

It will be noted that of 21,720 confinements attended by midwives during the year, only 6,191 (or 28.5 per cent) occurred in the homes; of the remainder, 14,161 (or 65.2 per cent) were confined in hospital and 1,368 (or 6.3 per cent) in nursing homes and hospitals not transferred to the Ministry of Health.

SUMMONING OF MEDICAL AID.

During the year medical aid was summoned under the Midwives Act, 1951, by a midwife in the following number of cases:—

(i) For domiciliary cases :-					
(a) Where the Medical with maternity med					740
(b) Others	 	 	 	 	72
(ii) For cases in Institutions	 	 	 	 	674

NOTIFICATIONS FROM MIDWIVES.

ne following notifications v	were r	eceived	from 1	midwiv	es:			
Sending for medical aid						***	 	1,486
Stillbirths		***	***	***			 	75
Laying out dead body		***					 	34
Liability to be a source	of infe	ection					 	239
Death of mother or bab							 	34
								1,868

SPECIAL INVESTIGATIONS.

The non-medical supervisors of midwives undertook the following special investigations during the year:—

Sending for medical aid		 	 		 216
Stillbirths		 	 		 75
Liability to be source of inf	fection	 	 ***		 96
Death of mother or baby		 	 ***	***	 34
Total		 	 ***		 421

Administration of Analgesics.

At the end of the year, the number of midwives in practice in the area who were qualified to administer analgesics in accordance with the requirements of the Central Midwives Board was as follows:—

(i)	Domiciliary	***	***	***	185
(ii)	In institutions			***	264

Analgesic		No. of sets of apparatus available at end of the year	No. of domiciliary cases in which analgesia given		
Gas and Air		147	4,175		
Trilene	***	30	1,375		
Pethedine		_	2,939		

Geriatric Visiting and Social Work.

The valuable work of the voluntary associations to which I have referred in previous reports continued and developed during the year.

Among the developments are :-

- (i) The opening of the Day Patient unit at Ottershaw Hospital.
- (ii) The opening of an Old People's Day Centre in Guildford.
- (iii) More cases were admitted to hospitals for a short period to give relatives a rest.
- (iv) The number of cases referred to the units shows an increase over the previous year.
- (v) The appointment of a health visitor in the Epsom area to work with the general practitioners in the care of the elderly.

The following statistics show the work done by the geriatric units during the year :-

CASES.

Geriatric Unit	No. of Hospital beds.	No. of cases referred to unit.	Referred by				Referred
			General Practi- tioners.	Hospital Almoners.	Local Authority.	Other sources.	General Health Visitors.
Kingston	300 (302)	1,033 (1,086)	784 (864)	28 (70)	12 (14)	209 (138)	17 (26)
Guildford	121 (110)	461 (509)	179 (192)	258 (271)	4 (9)	20 (37)	25 (28)
St. Helier	281 (285)	958 (906)	836 (778)	50 (110)	22 (18)	50 (—)	156 (90)
Chertsey and Woking	64 (64)	307 (286)	238 (229)	25 (45)	1 (7)	43 (15)	-
Farnham (Surrey cases only)	73 (73)	198 (127)	100 (96)	16 (14)	3 (4)	79 (13)	-
Redhill (all cases)	200 (209)	718 (502)	557 (394)	154 (108)	4 (—)	3 (—)	-
Total	1,039 (1,033)	3,675 (3,416)	2,694 (2,543)	531 (618)	46 (52)	404 (203)	198 (144)

AR AR BORN THEORY	Home Visits.							
Geriatric Health Visitor.	First visits.		D	Visits				
	H.V.	H.V. and Dr.	to Patients.	to Relatives.	Miscellaneous.	Total.		
Kingston	218 (100)	373 (788)	694 (813)	126 (40)	28 (—)	1,439 (1,741)		
Guildford	461 (511)	()	2,142 (2,299)	129 (118)	321 (320)	3,053 (3,248)		
St. Helier	74 (54)	(2)	1,638 (1,253)	(333)	47 (—)	1,759 (1,642)		
Chertsey and Woking	103 (89)	32 (78)	94 (80)	56 (37)	(-)	285 (284)		
Farnham (Surrey cases only)	(19)	14 (36)	(6)	()	()	20 (61)		
Redhill (Surrey cases only)	(139) (110)	-	1,332 (485)	54 (44)	(8)	1,525 (653)		
Total	999 (889)	419 (904)	5,900 (4,936)	367 (572)	396 (328)	8,081 (7,629)		

Cases dealt with who were admitted to :-

Geriatrie Unit.	Hospital.	Nursing Home.	Welfare Home.	Hospital to give relatives a rest.	Day Hospital.
Kingston	462 (532)	-	-	94 (65)	-
Guildford	82 (113)	17 (27)	17 (17)	46 (49)	
St. Helier	443 (379)	3 (5)	21 (22)	165 (146)	
Chertsey and Woking	35 (44)	57 (24)	13 (16)	47 (32)	10-14 daily 5 days a week
Farnham (Surrey cases only)	39 (45)	9 (6)	14 (—)	5 (10)	_
Redhill	358 (365)	-	12 (—)	96 (52)	
Total	1,419 (1,478)	86 (62)	77 (55)	453 (354)	_

The figures in brackets relate to the year 1960.

During the year 1,163 visits were also paid by general health visitors in connection with care and after care (other than tuberculosis) and 5,370 to old people to give help and advice and to refer cases for other social services where necessary.

HEALTH VISITING.

Establishment.

At the end of the year the total establishment of health visitors was $227\frac{1}{2}$.

During the year a special Sub-Committee was appointed to consider the implications on the County Health Service of the Report of the Working Party on Health Visiting.

Three meetings were held and the following recommendations were accepted by the County Council:—

- (i) That where recommended by the Divisional Executive hygiene inspections in schools be suspended or reduced in number for a trial period of one year.
- (ii) Part-time nurses to be engaged to undertake Minor Ailments Clinics and Routine School Medical Inspections.
- (iii) Clerical staff to be engaged to relieve the health visitors of some of the clerical work.
- (iv) Health Visitors to be granted alternate Saturday morning leave.
- (v) Plans for new clinics should include a small flat for occupation by a health visitor at an economic rent.
- (vi) Any health visitor who is prepared to use her car on duty should be paid casual user's car allowance.
- (vii) Driving instruction to be provided by County Council to certain health visitors.
- (viii) The establishment of relief health visitors to be increased by three.

These recommendations have now been put into effect and the relief given to the health visitors has meant that their time is now being used in the best possible way.

Mothers and Young Children.

The following table shows the home visits paid by health visitors in connection with the care of mothers and young children; home visits paid by these health visitors in respect of school health, mental deficiency and other health services will be found under these heads:—

-		establishment at 31st December	sid shment cmber.	Live births 1961.	alries	Case	Average No.	children under 5 years	Expe	Expectant mothers.	Childre 1 year	Children under I year of age.	age 1 and under	and and under	Other.	familles of house-
		1961.		Registered	No. of 1961	load.	H.V.	of age visited during					z years.	o years.		holds visited by
		D.H.V.	H.V.	adjusted.	birth cards.		-	year.	First visits.	Total visits.	First visits.	Total visits.	Total visits.	Total visits.	Total visits.	Health
North-Western	:	-	31	4	4,406	18,920	610	20,043	1,267	2,499	4,537	23,023	9,540	16,267	6,325	14,030
Central	-	1	57	**	2,924	13,311	554	15,294	1,680	3,191	2,845	14,328	6,973	11,946	2,094	11,868
North-Central	:		24	2,983	0,710	12,047	502	14,533	1.181	2,075	3,044	10,110	6,620	11,010	4,197	8 559
		-	14.0		1.700	7.877	563	24,807	597	1.131	1,776	10,382	4,980	9,445	736	6,466
Northern			10	1.179	1,084	4,557	456	4,724	429	772	1,204	5,099	1,931	3,351	913	4.04
		1	23	2,734	2,610	11,439	497	14,670	937	1,682	2,869	16,569	7,107	12,892	1,819	10,488
North-Eastern— Merton and Morden		0	6	816	799	3,621	403	4,725	548	1,095	741	4,595	2,590	5,121	248	3,794
Mitcham		717	6	958	831	3,830	425	4,978	0.00	1,100	855	890'9	3,607	6,777	1,173	3,949
		7	-	892	774	3,306	472	4,168	458	770	842	3,961	2,213	3,811	809	3,038
Mid-Eastern— Beddington and Wallington	eron	7. (+	448	470	1,859	465	2,424	237	423	461	2,338	1,033	2,420	199	1,721
Carshalton		714	6	731	714	3,329	370	3,447	361	613	670	2,697	1,399	3,218	299	2,390
Relief Staff		-	8.0	1	1	1	1	-	1	1	1	1	1	1	1	-
Total 1961		6	190	22,423	21,329	94,302	496	124,078	8,988	16,661	22,332	117,346	53,684	98,553	22,423	81,905
Total 1960	1	6	187	21,675	20,421	90,085	486	103,573	8,962	16,693	21,557	113,119	51,985	98,115	17,252	79,641

visit was intended.

Other Duties of Health Visitors.

The general health visitors also undertake the duties of school nurse and details of their work in the School Health Service are given on page 69.

Their other duties include work in connection with :-

- (a) Problem families.
- (b) Health education.
- (c) Visiting the elderly in their homes.
- (d) Care and after care of the mentally subnormal in the community.

The Health Visitors' Training Course.

The scheme adopted by the County Health Committee in January, 1955, for training candidates to undertake service in the County as health visitors continued in 1961.

Twenty students were selected to take the course, which commenced in September, 1961, and all sat the examination.

Fifteen were successful in obtaining the Health Visitor's Certificate of the Royal Society of Health and 10 have since been recruited to the County Health Visiting staff. One Rhodesian student was sponsored by the British Council and after qualifying returned to work in the native development scheme in her own country.

Training of Hospital Student Nurses.

The General Nursing Council's revised syllabus for the training of student nurses requires that the student nurse shall have knowledge of the social aspects of disease, and the facilities provided by the local health authorities, under the National Health Service Act.

Many of the hospitals have asked for lectures to be given by members of the staff and for the student nurses to be given the opportunity to observe the work of district nurses and health visitors.

During 1961 7 lectures were given by the Chief Nursing Officer, 25 by senior health visitors, 11 by superintendent district nurses and 5 by members of the Council's medical staff. Most of the students spend a day or two on the district with members of the staff. This has entailed extra work, but the comments of the sister tutors and ward sisters indicate that these visits were of great value to the student nurses and that it is a valuable link between themselves and the hospital nursing staff.

VACCINATION AND IMMUNISATION.

Diphtheria Immunisation.

The Council's policy in regard to immunisation remained unchanged from the previous year.

IMMUNOLOGICAL STATE.

The following table gives details of immunisation against diphtheria carried out during 1961.

	Distri	et.			001	Number of mpleted a sary immu the year of Decemb	full cours misation o	e of luring	receive inject prin ear	ed a secon tion (i.e. : nary imm lier age) o	of childre dary (re-in- subsequen- nunisation during the December,	aforeing tly to at an year
				Age	0-1	1-4	5—14	Total	0—1	1-4	5—14	Tota
M.I	3. and	Urbar	1.						12511			
Banstead	444	444		***	190	307	95	592	****	156	1,057	1,213
Barnes		111	***	***	121	268	44	433	-	42	601	643
Beddington as	id Wall	ington		111	118	294	67	479		16	600	616
Carshalton	400	4.4.4	***	111	242	404	134	780		253	803	1,056
Satanbara and	Washin	aham			151	459	64	674		21	783	804
Caterham and		-	***	***	279	576	231	1,086		32	896	928
hertsey	Povelov		111	100	434	770	102	1,306		101	1,619	1.720
Coulsdon and Corking		***	***	444	49	256	60	365		23	366	389
		***	***	***	333	79	51	463		59	767	826
Egham Epsom and E	well	***		***	334	510	57	901		312	1,533	1,845
apoont and as		-	***								0.000	
Sher					352	426	96	874	5	552	1,350	1,907
arnham					122	289	14	425		31	629	666
rimley and C		y		***	222	471	53	746	-	53	664	717
odalming					64	145	33	242	-	54	368	422
uildford				***	164	511	150	825	-	56	1,075	1,131
								100				400
Iaslemere	***	101	***	***	74	57	51	182	1	18	443	462
Cingston-upor			0.00	0.11	211	301	45	557	-	170	920	1,090
eatherhead		111	443	411	257	300	62	619	-	202	992	1,194
dalden and Co		***		***	260	354	121	735 833	-	276	1,310	1,586
ferton and M	orden	111	4.00	***	244	449	140	833	-	42	1,288	1,330
Iiteham	***				327	646	269	1.242	-	69	1,409	1,478
teigate					223	575	212	1,010	_	64	1,870	1,934
Richmond				***	166	360	61	587	_	59	762	821
urbiton					379	539	146	1,064	_	274	2,006	2,280
utton and Ch				***	465	578	133	1,176	-	524	1,363	1,887
Valton and W			***	***	226	453	197	876		42	580	622
Vimbledon		111			193	598	104	895	-	147	1,058	1,205
Voking	***		***	***	244	762	293	1,299	-	40	1,601	1,641
	Rura	I.									1	
lagshot				200	85	207	53	345	-	10	359	369
orking and I		***		***	118	361	65	544	-	27	575	602
odstone		160			312	384	214	910	-	36	514	550
uildford	111	111	***	***	243	483	193	919	1	50	1,338	1,389
Hambledon		***			90	171	100	361	-	9	687	696
Total 1	961				7,292	13,343	3,710	24,345	7	3,820	32,186	36,013

DIPHTHERIA NOTIFICATIONS.

There were no cases of diphtheria in children notified during the year. Home visits paid by health visitors in connection with vaccination and immunisation totalled 1,054.

Smallpox Vaccination.

The following table shows the number of persons vaccinated or re-vaccinated during the year.

Districts.			Vacci	nated.					Re-Vaco	inated.		
Age	-1.	1.	2-4.	5-14.	15+.	Total.	-1.	1.	2-4.	5-14.	15+.	Total.
M.B. and Urban.												
Banstead	310	28	18	17	18	391	-	-	4	26	168	198
Barnes	257	71	21	17	18	384		2004	3	18	46	67
Beddington and Wallington	317	19	8	9	16	369		-	4	11	72	87
Carshalton	430	42	23	30	30	555	_	_	5	11	76	92
Caterham and Warlingham	423	47	33	35	46	584	-	-	11	15	78	104
Chertsey	486	64	45	17	49	661	-	- lane	9	30	129	168
Coulsdon and Purley	875	62	45	58	58	1,098		need .	3	17	93	113
Dorking	165	26	7	7	21	226	-	-	1	9	60	70
Egham	243	27	19	10	28	327	-	1	3	13	83	100
Epsom and Ewell	571	61	35	29	51	747	-	-	2	39	227	268
Esher	610	35	26	26	32	729	-37	-	11	62	325	398
Farnham	287	16	14	8	14	339	_	-	7	31	145	183
Frimley and Camberley	352	36	20	21	26	455	-	1	16	36	112	165
Godalming	110	58	8	7	11	194		1	2	4	42	49
Guildford	255	243	51	27	55	631	-	1	9	32	146	188
Haslemere	91	18	6	8	6	129	_	2	1	20	52	75
Kingston-upon-Thames	314	43	38	19	48	462	-	-	10	37	283	330
Leatherhead	400	42	30	33	25	530	-	-	5	35	175	215
Malden	388	27	7	10	19	451	-	-	3	15	71	89
Merton and Morden	551	18	16	26	52	663		2	7	24	173	206
Mitcham	679	24	20	27	36	786	-	_	7	12	67	86
Reigate	448	42	18	50	43	601	-	-	5	24	187	216
Richmond	250	91	11	17	7	376	-	-	5	24	42	71
Surbiton	685	61	27	36	56	865	-	-	9	33	288	330
Sutton and Cheam	667	74	36	43	61	881	-	-	9	41	267	317
Walton and Weybridge	335	63	38	23	79	538	-	-	16	33	283	332
Wimbledon	478	41	33	17	50	619		-	2	8	102	112
Woking	321	349	102	29	42	843	-	-	9	27	179	215
Rural.												
Bagshot	154	10	19	12	15	210	-	-	3	14	42	59
Dorking and Horley	000	32	12	24	27	323	-	-	7	31	145	183
Godstone	178	204	45	50	16	493	-	-	6	14	126	146
Guildford	519	102	43	32	45	741	-	2	13	54	212	281
Hambledon	301	32	19	16	11	379	2	1	10	33	163	209
Total 1961	12,678	2,108	893	790	1,111	17,580	2	11	217	833	4,659	5,722
Total 1960	11,869	1,508	626	538	776	15,317	1	6	190	770	3,871	4,838

Whooping Cough Immunisation.

The following table shows the number of children immunised during the year 1961. In interpreting these figures it should be borne in mind that many children are inoculated with a combined diphtheria-pertussis prophylactic.

	I	District.				a primary cour	who complete se of inoculation g 1960.
						0-4 years.	5-14 years.
		and U				495	15
Banstead Barnes	***	***	***	***	***	407	6
Beddington	and W	allingt	000	***	***	401	16
Carshalton	OWELLA TO				***	614	15
Caterham an	d Wa					599	26
Jarous sala							
Chertsey						825	70
Coulsdon and	i Purk					1,186	47
Dorking				***	***	299	12
Cgham				***		415	17
Epsom and		***	***	***		828	21
Ssher		***		***		763	58
arnham		111	***	***		421	9
rimley and	Camb	orley	***	***	***	674	31
lodalming	***					209	1
uildford	***	***	***	***	***	652	33
Haslemere		***		***		139	7
Kingston-upo	n-Tha	mes	***	***	***	505	14
eatherhead	***	***	***	***	***	542	24
falden and			***	***	***	616	21
ferton and	Morde	n	***	***	***	673	38
ditcham						957	43
Reigate	***	***	***	***	***	743	20
Richmond	4.00	****	***	***	***	527	4
urbiton	***		***	***	***	841	23
utton and (***	***		1,022	35
Valton and	Work	ridge			1000	671	118
Vimbledon	··· oy or	ruge	***	***	***	719	30
Voking	***	***	***	***	***	998	97
			1000	10000	-	-	
	I	tural.					
Bagshot	***	***	***	***	***	282	27
orking and		у	***	***	***	436	28
lodstone	***	***	***	***	***	629	56
luildford	***	***	***	***	111	793	33
Iambledon	***	***	***	***	***	256	29
	Total	1961	***	***		20,137	1,024
	Total	1960				18,550	687

Yellow Fever Vaccination.

At the yellow fever vaccination centre at the Grange Road Clinic, Kingston-upon-Thames, 567 persons were vaccinated against yellow fever during the year.

B.C.G. Vaccination.

The scheme for the vaccination of school children provides for the following categories:—

- (i) School children between their 13th and 14th birthdays.
- (ii) School children approaching 13 years of age who can conveniently be vaccinated along with children of that age.
- (iii) School children of 14 years of age or older.
- (iv) Students attending universities, teacher training colleges, technica colleges or other establishments of further education.

Statistics for categories (i) to (iii) above for the year are shown below.

Division.			No. in age group offered Vaccina- tion.	Consents.	Percentage of consents.	Absent.	Mantoux +ve.	Percentage +ve.	Absent from B.C.G.	Vac- cinated,	Percentag of age group who were vac- cinated.
North-Western			3,395	2,873	84.6	260	154	5.9	71	2,388	70.3
Central	***	***	2,772	1,965	70.9	27	80	4.1	19	1,839	65.9
North-Central	***		3,378	2,661	78.8	62	135	5.1	1	2,463	72.1
Southern			2,848	2,106	77.5	159	137	6.9	_	1,810	63.6
South-Eastern			1,579	1,148	72.7	122	67	6.5	6	953	60.4
Northern	***		715	658	92	8	38	5.8	-	612	85,6
South-Western	***		3,720	2,945	79.4	70	185	6.4	16	2,674	71.6
North-Eastern-											1.00
Merton and More	ien		1,218	1,009	82.8	95	38	4.2	39	837	68.7
Mitcham	***		1,241	1,121	90.3	112	79	7.8	48	882	71.1
Wimbledon	***		1,170	847	72.4	54	50	6.3	25	718	61.4
Mid-Eastern—							1000			1	
Beddington and	Wallingt	ton	576	392	68.1	16	18	4.8	12	346	60.1
Carshalton	***		307	226	73.6	10	12	5.6	6	198	64.5
Total	8		22,919	17,951	78.8	995	993	5.9	243	15,720	68.6

The figures for vaccination to persons in category (iv) above are as follows :-

No. skin tested	 327
No. found positive	 89
No. found negative	 238
No. vaccinated	 238

Anti-tetanus Vaccination.

The Council's medical staff give this vaccine when asked to do so and not as a routine measure. During the year 22,891 children under 15 years of age completed a primary course of three injections with either single or combined vaccine and 7,888 children in the same age group received a reinforcing dose. It is worth noting that these figures again show a marked increase over the previous year.

Poliomyelitis Vaccination.

The following table shows the number of persons vaccinated in period 1st January to 31st December, 1961:—

Class.	No. vaccinated with one injection.	No. of persons awaiting vaccination at 31st December, 1961.	No. of persons who have had third injection.
Children born 1943-1961	28,366 6,821 22,594 5,584	=	=
Totals	63,365	5,202	78,435

Of the 63,365 persons vaccinated during the year with one injection, 31,219 were dealt with by general practitioners. The amount of work undertaken by general practitioners is well shown by the following figures of record cards received from them:—

(i)	1st and 2nd injection			***	31,219
(ii)	3rd injection		***		30,393
(iii)	Last injection, 3rd and	4th	***		24,800
(iv)	Last injection 4th	2020	7000	1000	13.734

AMBULANCE SERVICE.

Organisation and Administration.

There were no fundamental changes in organisation and administration during the year. I referred in the annual report for 1960 to the opening of a new Control for the whole of the Metropolitan Area. This control is situated at the Training School and Ambulance Headquarters at New Malden and is linked with the two Main Stations and the Sub-Stations in the area by a closed teleprinter circuit. The experiment has been a considerable success and has realised the advantages in efficiency and economy which were expected to accrue from a single central control for a large area; in addition much experience has been gained in the organisation of a central control. Consideration is now being given to extension of the system with modifications to the ex-Metropolitan area. The increasing volume of out-patient work continued to throw a heavy strain on the service and it has been necessary to make provision for a further increase in the fleet of vehicles.

Operational Strength.

Vehicles.

The operational fleet was increased by the addition of one ambulance in the Chertsey Control area, because of increased work involved by the opening of the Geriatric Day Hospital at Ottershaw. The total strength of the operational fleet (including agency services) is now 73 ambulances and 43 sitting case vehicles. A considerable amout of transport for out-patients is also provided by the 300 members of the Hospital Car Service.

In June 1961 orders were placed for the purchase of 13 Wadham/Morris ambulances to replace 13 Daimler ambulances and 15 Morris J2 sitting case vehicles to replace 15 Kenex-Bedford sitting case vehicles. The Daimler ambulances have been in service since 1950.

Towards the end of the year the County Health Committee agreed to acquire a further 12 operational ambulances and 12 sitting case vehicles to meet increasing demands.

PERSONNEL.

The establishment of operational personnel was increased by (a) 40 driver/attendants to man the additional vehicles referred to above; (b) 2 driver/attendants to man the additional day ambulance at Chertsey; and (c) by 19 driver/attendants to compensate for the loss of man-hours resulting from the introduction of a 42-hour week.

Premises.

The new Control Station at Redhill was completed and was officially opened by the Chairman of the County Council on 28th November, 1961. Proposals for further sub-stations are in the planning stage.

Voluntary Organisation.

The County's ambulance service continues to make maximum use of the available voluntary organizations, viz., the St. John Ambulance Brigade, the British Red Cross Society, and the Hospital Car Service. A summary of the work done by these services is given in Table II.

Annual Efficiency Competition, Awards, etc.

The finals of the Annual Efficiency Competition were held at the Ambulance Training School on the 12th June 1961. The result was as follows:—

A. L. Roberts—Shield St. Helier Main Station. Hooper—Shield St. Helier Main Station.

A particularly pleasing feature of this year's competition was that the winning team went on to win the Regional Final which entitled them to compete for the National Trophy. They gained a creditable fourth place in this competition which was held at Moreton in Marsh, Gloucestershire, on the 1st October, 1961.

Gatwick Airport.

There was a further increase in the number of aeroplanes using the airport and in the number of passengers carried. As a precautionary measure the Ambulance Service was required to take "Full Emergency" action on 56 occasions. This action is indicated by the airport authorities when an aeroplane about to land reports any defect or difficulty. On each occasion two ambulances were sent to stand by at the airfield and other ambulances in the area were held in readiness. Fortunately, their services were never required.

Work of the Service.

The number of patients carried and the mileage run still continues to increase. Table I shows an increase of 24,168 patients carried and an increase of 139,663 miles run over the 1960 totals.

EMERGENCY CASES.

The number of emergency cases, also continues to increase. To a large extent this is bound up with the increase of road traffic. The average time taken to arrive at the scene of an accident from the time of the receipt of the call was 5.1 minutes for the direct service and 6 minutes for the agency service. It must be remembered that the latter operate largely in the more rural parts of the County.

Civil Defence.

During the year further progress was made in the reorganisation of the Ambulance and First Aid Section as authorised in Ministry of Health Circular 9/60. Four additional peace-time ambulance supervisors were seconded to full Civil Defence duties to assist Column Officers in that organisation. This means that in each of the six Civil Defence areas of the County, there is now a Supervisor available to give advice and assistance in the training of the Ambulance and First Aid Section.

Two large scale County exercises were carried out during the year with a view to gaining experience in deployment from an operational base to damaged areas. Many small scale local exercises were carried out in connection with column procedure. It is expected that officers of the St. John Ambulance Brigade and the British Red Cross Society will organise First Aid Parties of their own personnel within the Ambulance and First Aid Section of the Civil Defence Corps and discussions are going on with the societies with this end in view.

Training of Civil Defence volunteers was continued in nearly all County Districts and an average of 70 classes a week is being held.

Miscellaneous.

Under the Road Vehicles Lighting (Amendment) Regulations, 1961, Police, Fire, and Ambulance Service vehicles may carry a revolving light, coloured blue, in the roof for identification purpose. All ambulance vehicles are being equipped in this manner.

During the year the radio equipment in the Metropolitan part of the County was replaced by new and more efficient sets.

The direct method of mouth to mouth artificial respiration has now been officially introduced into the County Ambulance Service, and the necessary training and operational equipment has been acquired.

TABLE I.
WORE DONE BY THE UNIFIED AMBULANCE SERVICE 1959-1961.

				EMERGENCY.	ox.			MATERNITY.	SITY.				9	GENERAL.				
Year.	Accident.	lent.	Illness.	988.	False Alarms.	Total.	Л.	Total.	i.	Hospital.	ital.	Out-Patient	tient.	Infec	Infectious Discases.	Private.	sto.	Abortive.
	Patients.	Miles.	Patients. Miles. Patients. Miles.	Miles.	Miles.	Patients. Miles.	Miles.	Patients. Miles.	Miles.	Patients. Milos.	Milos.	Patients.	Miles.	Patients.	Miles.	Patients. Miles.	Miles.	Miles.
1959	12,591	12,591 80,230		3,513 22,693	8,396	16,104 111,319	911,319	6,563	69,630	53,762	626,004	352,984	2,545,703	1,798	25,596	693	7,197	9,403
1960	12,834	82,119	3,551	23,050	9,893	16,385 1	115,062	6,335	67,362	58,906	675,009	371,281	2,593,220	940	15,706	648	6,899	17,761
1961	13,518	13,518 86,834	3,795	25,830	25,830 11,548	17,313 124,212	124,212	6,467	66,138	58,358	674,900	394,829	2,720,726	1,013	16,354	683	8,081	20,071

	Emer	Smergeney.	Maternity.	nity.	Gen	General.	Grand	Grand Total.
Year.	Patients.	Miles.	Patients.	Milos.	Patients.	Miles.	Patients.	Miles.
626	16,104	918,111	6,563	69,630	409,237	3,213,903	431,904	3,394,852
0961	16,385	115,062	6,335	67,362	431,775	3,308,595	454,495	3,491,019
196	17,313	124,212	6,467	66,138	454,883	3,440,132	478,663	3,630,682

TABLE II.

DIVISION OF WORK SHOWN IN TABLE I AS BETWEEN COUNTY'S DIRECT SERVICE AND THE VOLUNTARY ORGANISATIONS.

Year.	County	Service.	Vol	untary Org	anisations.			tal Car vice.	Infec Dise Hosp	8.908
rear.	Patients.	Miles,	S.J.A	.В.	B,R.	c.s.	The street	361	70.00	
	Latients.	miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles
1959	306,806	1,734,784	54,455	476,359	5,843	64,863	64,205	1,112,711	595	6,135
1960	324,626	1,813,674	58,739	489,097	7,346	70,619	63,784	1,117,629	-	
1961	343,282	1,877,436	63,671	518,947	8,223	75,017	63,487	1,159,282	-	-

TABLE III.

DIVISION OF WORK DONE BY COUNTY'S DIRECT SERVICE AS BETWEEN VEHICLE TYPES IN 1961.

					Patients.	Miles.
Ambulance	444	***			 123,677	938,724
Sitting Case	Vehicle	and Car	***	***	 219,605	938,712

PREVENTION OF ILLNESS, CARE AND AFTER CARE OF THE SICK.

Tuberculosis.

Responsibility for dealing with this disease is shared between the County Council and the South West Metropolitan Regional Hospital Board, the former being responsible for prevention, care and after care, the latter for diagnosis and treatment. Close liaison is maintained between the officers of the two authorities and many of the medical staff are jointly appointed.

The Chest Services Sub-Committee of the Regional Hospital Board has been abolished. All matters concerning chest diseases now come under the purview of the Board's Medical Advisory Committee.

CHEST CLINIC ORGANISATION.

There are seventeen independent Chest Clinics which are grouped under the respective Chest Physicians into ten Chest Clinic areas, each area being in charge of a Chest Physician (one Chest Physician is in charge of the Mass Radiography Unit and two others are respectively Physician Superintendents of Milford Chest Hospital and King George V Chest Hospital).

The new Out-patient Department at Kingston Hospital which is at present under construction includes a chest clinic as an integral part of the medical consulting suites. It is hoped that this clinic will be opened by 1st January, 1963. The chest clinic at "Keeldar," Queens Road, Kingston, will then be closed. All the schemes for the up-grading of chest clinics in Surrey have now been developed with the exception of that for Mortlake clinic.

Tuberculosis visiting throughout the County is undertaken by 39 health visitors of whom 19 devote full time to the tuberculosis service, the remainder being general health visitors who undertake the tuberculosis visiting in certain rural areas of the County. During 1961 these health visitors paid a total of 22,473 visits to tuberculous households and attended 3,212 chest clinic sessions.

As a result of the Adrian Committee's report on Mass Radiography, some pregnant women and some children continue to be excluded from miniature radiography. This has limited x-ray examinations in these groups for whom large film examinations are now undertaken.

At the major chest hospitals in Surrey the number of beds under the clinical control of area Chest Physicians continues to increase and many more beds for non-tuberculous chest conditions are being used in these institutions. In addition, beds are provided for chest physicians locally for both tuberculous and non-tuberculous chest conditions.

Progress is continuing to be made in the control and supervision of tuberculosis but it is important to note that there are still 7,714 patients on the clinic registers who require supervision and that, furthermore, 154 of these patients had positive sputum findings within the last six months of 1961.

Of all new patients (excluding contacts) seen at chest clinics in 1961, viz., 6,212, only 406 were tuberculous. The remaining 5,806 were non-tuberculous making the ratio of tuberculous to non-tuberculous patients approximately 1:14, but it should be noted that, in this connection, the phrase "non-tuberculous" includes very many patients who are not suffering from any serious chest complaint, having attended for observation. The proportion of tuberculous patients to patients suffering from non-tuberculous chest ailments is approximately 1:4. This gives some measure of the trend of development and the extension of chest clinic services to include non-tuberculous chest conditions which has been coupled with the build-up of diagnostic and treatment facilities mentioned above.

This general transition in chest clinic and chest hospital work is one which will continue to require consideration in the near future in relation to corresponding developments in the field of prevention, care and after care of patients. WORK OF THE CHEST CLINICS.

The Chest Physician of the Chest Clinic is responsible for all the work of the Anti-Tuberculosis Schemes in his area. In addition to his work in relation to the treatment of tuberculous persons, for which he is responsible to the Regional Hospital Board, he is responsible to the County Council for the work in relation to the prevention of tuberculosis. This latter includes:—

(i) Examination and Supervision of Contacts.

The examination and continuing supervision of contacts remains at a high level. In 1961 2,935 new contacts were seen at chest clinics, of which 28 were diagnosed as suffering from tuberculosis (9.5 per 1,000 examined). The total new contacts examined in 1961 represents an increase of 226 over the 1960 figure.

A close follow-up of school contacts was maintained by Divisional Medical Officers, Chest Physicians and the Director of the Surrey Mass Radiography Units, and the examination and tuberculin testing of children exposed to risk from a confirmed case of tuberculosis were carried out whenever such a risk was known to have occurred. (See also Tuberculosis in Schools, page 77.)

The need to keep contacts under continuing supervision even though when first examined they were found to be non-tuberculous is emphasised by the figures on page 47 where it will be seen that 21 contacts who on first examination were non-tuberculous later developed the disease.

(ii) B.C.G. Vaccination.

The scheme introduced by the Minister of Health to provide for B.C.G. Vaccination of contacts was put into operation in Surrey in 1950 and the work is undertaken by the Chest Physicians. It includes the B.C.G. vaccination of nursing staff of hospitals, domiciliary contacts, and infants at known risk, together with any special category of patient whom the Chest Physician decides should be offered B.C.G. In some areas the Chest Physicians are helped by Assistant Medical Officers who are formally approved for the purpose by the Minister of Health.

In 1954 the scope of B.C.G. Vaccination was extended to include all school children between their 13th and 14th birthdays, the vaccination being carried out by designated medical officers on the staff of the County Council. This was extended in 1959 to allow for the provision of B.C.G. vaccination to school children approaching 13 years of age who can conveniently be vaccinated along with children of that age, school children aged 14 or older and students attending universities, teacher training colleges, technical colleges or other establishments of further education. The extended scheme also enables vaccination to be offered to such other persons or groups as may be approved from time to time by the Minister of Health.

The following table shows the number of contact vaccinations carried out by Chest Physicians in each Chest Clinic area during the year 1961. They do not include B.C.G. vaccinations carried out as part of the programme for school children between their 13th and 14th birthdays which was undertaken by the School Medical Service (page 40).

	Ches	t Cli	nic.			Total.
			11/11			
Carshalton	***	***	121	***	19.55	48
Dorking	***	***	111	***	211	42
Egham	***		***	***	***	21
Epsom	***	***	111	***	***	142
Farnham	***	***	***	***	***	53
Guildford	***	***	111	***	***	154
Kingston					***	137
Merton and	Morde	n				57
Milford	***		***	***		21
Mitcham						66
Mortlake	***		***			107
Purley						55
Redhill						122
Sutton	***				444	130
Weybridge						113
Wimbledon						97
Woking	***			***		140
11 -3,414	Total					1,505

(iii) Garden Shelters.

During 1961 there were no requests for the issue of garden shelters to tuberculous patients. However, with the decline in demand for garden shelters in recent years it has been found possible to allocate a number of these structures for other purposes, e.g. for use at day nurseries, etc.

At the end of the year seventeen new type shelters were on loan to tuberculous patients in the County.

The following table shows the work of the 17 chest clinics in the year:—

							Respiratory (R)	ory (R)	Noz	-Respirat	Non-Respiratory (N.R.)		Totals	als		
						Adult.	11	Child	Adult.		Child	Ad	Adult.	Child.	Grand	
					_	K.	a;	(under 15 years)	M.	F.	(under 15 years)	N.	s.	(under 15 years)	Total.	
-	New Cases (Excluding Contacts)	(a) Diagnosed Tuberculous— (1) T.B. Plus (2) T.B. Minus (b) Non-Tuberculous (c) Not determined		1111	1111	102	1 69	115	10 00	96	-10	129 110 2,860 12	67 78 2,039 7	88 C S S C S S	198 208 5,787 19	6,212
01	Contacts First Examined	(a) Diagnosed Tuberculous (b) Non-Tuberculous (c) Not determined	lous	111	1111	-11	9	± 11	111	111	-11	554	841 3	1,508	2,903	3,935
60	Contacts Re-examined (Excluding those under Paragraph 2 above)	(a) Diagnosed Tuberculous (b) Non-Tuberculous (c) Not determined	lous	111	111	10	1 1	*	111	111	111	1,712	1,954	3,192	6,858	6.879
4	Transferred Cases	(a) From other Areas (outside the County)(b) To other Areas (outside the County)	outside the	Sounty)	11	140	138	15	10.10	901	1-	145	144	16	296 328	} 624
10	Cases Written off Register	(a) Recovered (b) Died (c) Lost sight of (d) Other reasons		::::	11111	268 98 47	38	E 815	200	0 8 8	20 2-1	281 100 57	250 28 41	81 a. a.	553 128 107 8	796
0	Cases Returned to Register				-	122	16	1	-	1	1	13	16	-	30	
-	Cases on Register on 31st	(a) Diagnosed Tuberculous	lous	1	-	4,014	2,994	247	151	259	49	4,165	3,253	596	7,714	
		(b) With known positive sputum previous six months (c) With other positive findings	tive sputum ths	within	the :::	104	000	11	1	100	11	104	20 20	11	154	

	50,904	807	217
other			
ctnest	:	:	***
I the	:	:	:
useases o		:	
rom c	:	:	-
mering	:	:	***
ostaents su	atients)	: : : : : : : : : : : : : : : : : : : :	
Cimics (including	ets of tuberculous p	to homes	inies
INO. OI SMCHGSHICES St Chest	than tuberculosis and contacts of tuberculous patients)	2. No. of visits by Medical Staff to homes	3. No. of rofile given at A.P. Chnics
1.		ci	60

A summary of the work of the individual Chest Clinics is given in the table which follows :-

Chest Clinie.		Population of Clinic Area	No. of T.B. Cases on the Recister	W	No. of T.B. Capes on the Recister	T.B. Cases on the Clinic Register		No. of Contacts Attending during 1961.	1961.	Found	No. of Contacts Found to be Definitely T.B.	by T.B.	Clinic Sessions.	Attendances.	Average Attendance per Clinic
			on 1/1/61.	diagnosed T.B.)	on 31/12/61.	Population on 31/12/61.	New.	OM.	Total.	New.	- PNO	Total.			Session.
Carshalton	-	56,490	481	17 01	434	7.68	98	174	260	1	01	02	185	2,548	13.8
Dorking	1	36,328	811	111	108	2.97	90	134	192	1	1	01	94	998	18.8
Egham	:	31,120	202	10	200	6.43	77	153	230	1	1	01	53	849	16.0
Epsom	:	106,280	484	31	435	4.09	230	577	807	1	6	*	219	4,205	19.2
Farnham		74,307	294	12	286	3.85	113	200	613	1	1	1	186	2,520	13.5
Guildford	:	126,536	704	40	709	5.60	210	254	191	65	1	4	224	5,490	24.5
Kingston	:	206,070	189	89	683	3.31	396	810	1,206	01	10	1	376	5,834	15.5
Merton and Morden	:	67,620	632	90	615	60.6	137	63.2	769	1	I	1	90 01 01	3,455	15.2
Milford	:	29,087	156	10	150	5.16	39	16	130	1	- 1	1	010	1,546	29.7*
Mitcham	-	96,380	486	56	425	4.41	195	136	331	-	1	1	171	3,010	17.6
Mortlake	-	79,690	359	51	376	4.73	194	291	485	1-	1	t-	235	2,844	12.1
Purley	:	108,800	169	25	894	4.30	100	190	290	1	1	1	181	2,861	15.8
Redhill	:	120,130	603	000	548	4.56	284	358	642	1	91	21	159	3,142	19.8
Sutton	-	110,772	748	42	726	6.55	196	513	109	21	01	7	2000	4,668	20.9
Weybridge		86,350	548	06	538	6.23	174	1,025	1,199	01	1	01	154	2,319	1.61
Wimbledon	:	56,990	320	552	289	5.07	199	248	447	9	04	00	109	1,821	16.7
Wolting		84,380	969	90	724	8.58	247	793	1,040	1	-	-	191	2,926	18.2
Totals		1,477,330	8,004	449	7,714	5.55	2,935	6,879	9,814	887	21	49	2,962	50,904	17.2

 ^{*} Average per doctor session = 9.9.
 ↑ This figure includes patients suffering from diseases of the chest other than tuberculosis and contacts of tuberculous patients.

CARE AND AFTER-CARE.

Social Work.

The scheme for the Care and After-Care of patients and their families who are attending the chest clinics continued on the same lines, each chest physician having the services of a care almoner to help in the solution of the social problems. Throughout the year the demand upon the time of the almoners in dealing with the non-tuberculous chest cases, mainly those with chronic bronchitis and lung cancer, increased considerably. The social work for the chest clinics continued to be linked with the social work for the prevention of the break-up of families and problem families (reported on page 19) in so far as both were served by the same team of eighteen social workers, five of whom dealt with chest work only, seven solely with the prevention of the break-up of families and problem families, and six with both. Two of the social workers, the Care Organiser and the Deputy Care Organiser, spent half of their time at the central office on duties of co-ordination and the other half of their time on field work for chest cases and the prevention of the break-up of families respectively—this division of the time of the two senior social workers between field work and administrative work has continued to be invaluable to both services.

Provision of Milk Free of Charge.

The average number of tuberculous patients receiving milk free of charge each week throughout the year was 406 (419 the previous year).

Segregation of Children in contact with Tuberculosis.

34 (68) children were boarded out during the year to protect them from risk of infection or to enable a patient to accept institutional treatment. 29 (60) of these were placed in Sendhurst Grange, the County Council's special hostel for the segregation of contacts, and the remainder either with foster parents or relatives or in children's homes.

28 (58) new cases were placed and 30 (62) returned to their own homes during the year; the average stay of the latter was 11 (12) weeks. (The corresponding figures for the previous year are shown in brackets.)

Care Committees for Tuberculosis and Chest Diseases.

During the year, the nineteen voluntary Care Committees continued their excellent work of caring for patients suffering from tuberculosis and other chest diseases, and their families.

Throughout the year, the Care Committees raised approximately £8,085 by their own efforts, and received £1,864 in grants from the County Council based upon £1 for each £1 raised by voluntary effort up to a maximum of £100 to each Committee. The total expenditure of £10,185 covered a wide range of items to meet individual needs, but the main items were food (£2,495), clothing, bedding and household items (£1,504), training grants (£836), pocket money for patients in hospital and fares for relatives to visit (£620) and holidays (£2,536).

The Standing Conference of Surrey Care Committees for Tuberculosis and Chest Diseases, which co-ordinates the work of the nineteen district Care Committees and which consists of representatives of the Care Committees and the County Health Committee, had an income of £2,112 during the year which included a grant of £200 from the County Council. The schemes which the Conference financed were those which were best dealt with centrally on behalf of all the Care Committees such as the provision of art therapy in chest wards (£254), loans and grants where substantial amounts are required for resettlement after treatment (£330), and summer holidays for families at the country and seaside (£1,558).

The beach chalets which were hired by the Conference provided a fortnight's holiday each for some 64 families comprising approximately 118 adults and 158 children who were selected by the chest physicians. In addition, 81 child contacts were sent to children's holiday homes for a fortnight.

The Conference continued to finance the purchase of materials for sale to patients under the County Council's occupational therapy scheme.

Occupational Therapy.

The establishment of the Occupational Therapy unit remains the same as the previous years, namely: Head Occupational Therapist, Assistant Head Occupational Therapist, seven Assistant Occupational Therapists, Technical Instructor, Supplies and Marketing Officer and Clerk/Storekeeper.

Students have attended for their practical experience during the year.

Occupational Therapy is provided at 11 classes in different parts of the County, namely at: New Malden, Kingston, Wimbledon, Woking, Guildford, Esher, Mitcham, Ottershaw, Purley, Epsom and Leatherhead. In addition the Chest Wards of 4 hospitals are visited regularly and instruction in Art is given voluntarily on Wednesday mornings at the New Malden Headquarters. The Standing Conference meets the expenses for general materials and travelling.

The number of persons registered for Occupational Therapy during the year was: chest 104 as compared with 105 in 1960. Other handicapped 110 as compared with 123 in 1960.

Exhibitions and sales have been held with success throughout the year, the mobile shop being increasingly valuable in this respect. The unit provided a section of the County Council's Exhibition at the Royal Counties Show at Guildford.

The Standing Conference and individual Care Committees have again given valuable assistance to the unit generally. The Voluntary Association for Surrey Disabled have also given valuable assistance during the year. The Jig-Saw Library still functions, the Standing Conference meeting expenses which are mainly postal. The amount expended on consumable materials was £3,435 4s. 6d. as compared with £3,538 6s. 4d. in 1960.

The average number of domiciliary visits remains much the same as last year. Generally the standard of work is high. The number of persons receiving Occupational Therapy at 31st December, 1961, was 627 of whom there were: (1) chest cases, 193 domiciliary, 49 in hospital and 20 postal; (2) other handicapped classes, 219 domiciliary, 13 postal and 133 attending centres.

Rehabilitation and Colonisation.

The County Council will accept financial responsibility for the maintenance of tuberculous patients who are recommended by the Chest Physicians for admission to the Rehabilitation Units at institutions approved for this purpose. The three centres to which Surrey patients are sent are :—

Papworth Hall, Cambridge. Enham-Alamein, Andover. Preston Hall, Maidstone.

The rates paid are in accordance with an agreed scale of charges and are reduced from time to time on the basis of the patients' fitness for work and the period of residence without a relapse. In respect of Papworth Hall and Enham-Alamein no responsibility is undertaken by a local authority until such time as a patient is able to work for five hours daily. During 1961 the Council were liable for 7 patients (2 each at Preston Hall and Enham-Alamein and 3 at Papworth) at one time or another. Chest Physicians continue to use the local facilities which exist at the Government Training Centres at Waddon and Egham, where a wide range of training facilities exist. While attending one of these latter centres a patient may live at home and continue to receive chest clinic supervision.

Mass Radiography.

I am indebted to the Medical Director of the Surrey Mass Radiography Units from whose report the following information is extracted. The area covered by the units includes, in addition to the Administrative County of Surrey, the County Borough of Croydon and parts of North East Hampshire and North Sussex. The statistics quoted below relate to the whole area covered by the units.

In 1961 the Surrey Mass Radiography Service x-rayed 120,823 persons. Two separate services are operated as follows:—

General Practitioner Chest X-ray Service.

which provides facilities for General Practitioners to refer patients for a chest x-ray.

Normal Mass Radiography Service.

which offers chest x-rays to the general public and groups of factory and office workers.

In Surrey the work of these two services are complementary to each other and to the chest services of the Region.

The Medical Director reports that the incidence of tuberculosis in the community has not changed to a marked extent in the last three years.

The following statistics give an indication of the work of the Surrey Mass Radiography Units during the year:—

		eral Practiti t X-ray Ser			Normal Ma iography Se	
	1959	1960	1961	1959	1960	1961
Total number X-rayed	6,935	9,100	11,144	93,687	94,074	109,679
Significant Pulmonary Tuberculosis*	38	44	54	124	104	153
Primary Lung Cancer	42	53	71	36	31	42
Number of men aged 45 years and over X-rayed	1,570	2,282	2,724	16,242	18,795	18,740
Primary Lung Cancer	39	49	55	33	27	38
Incidence rate per 1,000 examinations	24.8	21.5	20.1	2.0	1.4	2.0

^{* &}quot;Significant pulmonary tuberculosis" includes any newly detected case requiring treatment or close observa-

	To	TAL X-RAY	ED.	NUMBE	RS SHOWING	EVIDE TUB	NCE OF SIGNERCULOSIS.	NIFICANT P	ULMONABY
TYPE OF SURVEY.				М	ALE.	FE	MALE,		Combined
	MALE.	FEMALE.	TOTAL.	No. of Cases.	Incidence per 1,000 examina- tions.	No. of Cases.	Incidence per 1,000 examina- tions,	Combined Total.	Rate per 1,000 Examina tions.
General Practitioner referrals	5,539	5,605	11,144	40	7.2	14	2.5	54	4.8
Normal Mass Radiography Ser	vice.								
General Public	20,148	28,283	48,431	33	1.6	23	0.8	56	1.2
Industrial Groups	34,689	22,677	57,366	54	1.5	18	0.8	72	1.3
School Children	882	292	1,174	11†	12.4	2	6.8	13	11.0
Mental Hospitals and Institutions	988	620	1,608	7	7.0	1	1.6	8	4.9
Contacts	606	494	1,100	4	6.6	-	-	4	3.6
Totals	57,313	52,366	109,679	109	1.9	44	0.8	153	1.4

[†] These cases of tuberculosis all occurred in one school where the pupils had been in contact with a teacher suffering from active pulmonary tuberculosis.

Analysis of Abnormal Findings-Pulmonary Tuberculosis.

		General P Chest X-r		7.7	N	ormal Mas Se	s Radiog	raphy
Disposal of Cases.	Male.	Female.	Total.	Incidence Rate per 1,000 Examina- tions.	Male.	Female.	Total	Incidence Rate per 1,000 Examina- tions.
Recommended for domiciliary treatment	6	2	8	0.7	36	21	57	0.5
Recommended for Hospital treatment	25	5	30	2.7	49	12	61	0.6
Close clinic supervision required	9	7	16	1.4	24	11	35	0.3
Totals	40	14	54		109	44	153	
Occasional out-patient supervision	-		-	-	61	31	92	0.8
(a) Non-infectious cases	19	7	26		82	32	114	
(b) Infectious cases	20	5	25		21	7	28	
(c) Not determined	1	2	3		6	5	11	
Totals	40	14	54		109	44	153	

Analysis of Abnormal Findings-Non-Tuberculous Conditions.

General Practitioner Service and Normal Mass Radiography Service-Combined Statistics

	Conditio	n.					Male.	Female.	Total
Malignant neoplasms in the tho	rax :								1 100
(a) Primary tumours			***	100		***	96	17	113
(b) Secondary tumours	***					***	3	8	11
Non-malignant tumours							21	17	38
Lymphadenopathies, excluding							3	-	3
Sarcoidosis (including enlarged					***		33	22	55
Congenital abnormalities of the	beart ar	nd vase					9	3	12
Acquired abnormalities of the h	part and	vagen	lar sve	tem			92	58	150
Pneumoconiosis without P.M.F.		· vascu					3		3
Pneumoconiosis with P.M.F			***	***	***	200			-
	luma (in	-leading		nanitia)	***	***	557	379	936
Bacterial and virus infection of	rung (m	crucing	pneur	nomicis)		***	18	20	38
Bronchiectasis		***	****	111	***	***	29	14	43
Pulmonary fibrosis (non-tubered		111	***	***	***	100	11	14	13
Spontaneous pneumothorax	***			1000		***	11	2	10
Abnormalities of the diaphragm	and oes	ophagu	s (inclu	iding h	iatus h	ernia		100	0.0
of stomach)	10.1	***	***	***	***	***	9	15	24
Pleural Effusion (non-tuberculo	us)	***	***	***	***	111	4	2	6

Recuperative Holidays.

The County Council's Recuperative Holidays Scheme deals with patients who are in poor health and require a recuperative holiday but do not require organised medical or nursing care. At its commencement in 1948, the Council's scheme was restricted to patients who, following treatment in hospital, required a short period of recuperation to complete their recovery. From the 1st April, 1952, the scheme was extended to hospital out-patients and was further extended as from the 1st April, 1953, to include persons who have been ill at home. Patients may be accepted on the appropriate medical recommendation for recuperative holidays for a maximum period of three weeks extendible to four weeks in exceptional circumstances, and as regards those groups towards whom the Council have special responsibilities (e.g., tuberculosis, cases of mental illness, mental defectives) for a maximum period of three months extendible only in exceptional cases.

All patients, except those suffering from tuberculosis, sent to "holiday homes" under the scheme are required to pay a standard charge of £2 6s. 0d. per week towards their maintenance; if they claim to be unable to do so they are required to submit a statement of their financial circumstances, on which the amount they will be asked to pay is assessed.

Mothers and young children are dealt with under Section 22 of the National Health Service Act and school children under the Education Act.

Particulars of the cases dealt with during the year ended 31st December, 1961, are as follows:-

			Hospital In-Patients.	Hospital Out-Patients.	General Practitioners' Cases.	Total.
Number of patien Cost (before dedu			126	116	161	403
patients)		 	 £1,306	£1,284	£1,679	£4,269
Length of stay :	1 week	 	 6	9	5	20
	2 weeks	 	 108	92	140	340
	3 weeks	 ***	 10	14	15	39
	4 weeks	 ***	 2	1	1	4
over -	4 weeks	 	 _	-	_	-

Night Attendance Scheme.

The Council, as in previous years continued to guarantee any loss up to a maximum of £100 per annum sustained by the Guildford Old People's Welfare Committee and the Farnham Women's Voluntary Services, and up to a maximum of £50 per annum by the Mitcham Old People's Welfare Committee and the Wimbledon Guild of Social Service in running their night attendance schemes, on the understanding that any payment made by the Council must continue to be limited to reimbursement of loss on fees plus bus fares and that no part of the Council's contribution must go towards payment of administrative expenses.

During the year the Council approved the extension of the night attendance scheme "by payment of grants up to £1 a day to recognised voluntary bodies which, subject to prior approval by the County Medical Officer, arrange for bedridden patients for whom no other care is available to be maintained in nursing homes or private old people's homes for a maximum of three months."

Four cases were admitted to nursing homes during the year.

Nursing Equipment.

LOANS.

Under the Agreements concluded with the British Red Cross Society and the St. John Ambulance Brigade these Organisations have continued to maintain Medical Loan Depots throughout the County from which nursing equipment can be borrowed for a maximum period of six months. All loans are free of charge but a deposit, which is returnable, is required. The number of Depots maintained at the end of the year was 56.

The extent of the loans of nursing equipment during the year ended 31st December, 1961, was as follows:—

	Art	ticle.				No. of Loans.	Article.			No. of Loans.
Air	beds					46	Bed cradles	 		524
,,	bellows				***	35	Crutches	 		257
33	rings	***				1,107	Douche cans	 		17
Bed	rests	***				1,012	Feeding cups	 		165
23	pans		***	***		1,935	Inhalers	 	***	15
22	tables					168	Mackintosh sheets	 		1,542
Inv	alid chai	rs				1,364	Steam kettles	 		9
Com	modes					1,001	Urinals	 		672

PURCHASE.

In cases where a patient needs an article of nursing equipment permanently, the County Council have agreed to supply it provided an undertaking is given to repay the full cost, which in the case of the more expensive articles may be made by instalments. In necessitous cases the article is provided and the patient is assessed by the County Treasurer as to the amount, if any, required to be contributed.

Venereal Diseases.

The clinics at Guildford, Woking, Redhill and Carshalton were continued during the year by the respective Hospital Management Committees. The duty of persuading women defaulters to resume attendance and of securing the attendance of persons exposed to infection continued to be exercised by the Council's Special Services Visitor.

Information as to Surrey residents having been treated at Clinics is obtained from the annual return which is made by the Medical Officer of the Clinic to the Ministry of Health, copies of which the Medical Officer is required to send to the Medical Officer of Health of each County and County Borough in which patients treated at the Clinic reside. The following summarises the information received:—

1961.	Guildford Clinic.	Redhill Clinie.	St. Helier Clinic.	Woking Clinic.	Croydon Clinic.	Other Clinics.	Total.
New Cases (Surrey). Syphilis	6	-	11	1	3	17	38
	(3)	()	(4)	(1)	(1)	(15)	(24)
Gonorrhoea	45	3	63	7	22	177	317
	(40)	(5)	(45)	(6)	(18)	(160)	(274)
Other conditions	179	30	472	49	105	878	1,713
	(166)	(37)	(383)	(47)	(112)	(886)	(1,631)
Totals	230	33	546	57	130	1,072	2,068
	(209)	(42)	(432)	(54)	(131)	(1,061)	(1,929)

The figures in brackets relate to the year 1960.

I mentioned in my report last year that there had been progressively fewer cases of syphilis in the past few years. It will be noted from the table below, however, that this improvement has halted and the number of these cases has increased by 50 per cent on last year and is in fact the highest number since 1956. The number of gonorrhoea cases has also continued to steadily increase in accordance with the trend mentioned last year.

Year.	Syphilis.	Gonorrhea	Other Conditions.	Total.
1947	255	415	2,068	2,738
1948	192	291	2,244	2,727
1949	148	218	1,919	2,285
1950	110	176	2,102	2,388
1951	105	123	1,466	1,694
1952	74	156	1,439	1,669
1953	67	165	1,469	1,701
1954	42	153	1,195	1,390
1955	40	143	1,150	1,333
1956	48	161	1,154	1,363
1957	32	159	1.114	1,305
1958	28	160	1,179	1,367
1959	26	251	1,308	1,585
1960	24	274	1,631	1,929
1961	38	317	1,713	2,068

· The great majority of these conditions are not venereal.

Health Education.

Early in the year the County Health Committee gave further consideration to the Report of the Working Party on Health Visiting which stressed that the spreading of knowledge on matters of health was the primary function of the Health Visitor.

The subsequent review of the allocation of Health Visitors' duties, the employment of extra clerical and professional staff, the provision of extra transport, the re-statement of Divisional Health Visitors' duties in terms of Group Advisers—all these factors provided an impetus to the development of facilities for improved health education.

Thus, while the medical, health visiting, nursing, day nursery and office staff are imbued with the feeling that a large content of their normal work is of an educational nature, Health Visitors in particular are now giving more time to group teaching or discussion. Whereas such teaching has taken place as usual in Infant Welfare Centres and Ante-natal Clinics in mothercraft and relaxation classes, there is now an increasing tendency to conduct talks in schools on personal hygiene and child care.

For the past decade, Divisional Medical Officers have made extensive use of the services of Mr. Frank Buckler, M.C., for giving lectures on a fee-paying basis on health education subjects to various voluntary organisations such as women's groups, parent-teacher associations, youth clubs, old people's welfare associations, Rotarians and so on. Mr. Buckler retired from this work in September, 1961; his retirement leaves a gap in the County's health education programme and it has not yet been possible to make any formal arrangements to replace him. Divisional Medical Officers are, on the whole, managing to meet individual requests for lectures but can do little to institute an organised campaign on health education subjects.

A growing feature in health education has been the greater use of the visual appeal in the form of the film, filmstrip, chart and poster. Some attention has also been given to the more efficient display of booklets and leaflets, and there have been tentative efforts at more advanced display work. Small libraries on health education are being established at divisional offices.

During the year the County Council's Handbook of Health Services was revised and brought up to date and a new edition published; in addition, in some areas it has been possible to issue a divisional handbook on the local health services or on home safety. Several areas have instituted special health campaigns, notably those on Diphtheria Immunisation, Poliomyelitis, Safety in the Home, Foot Health, Accident Prevention, Smoking and Lung Cancer and Dental Health. The latter campaign is described more fully in the Report of the Principal School Dental Officer. In these, and many other spheres, the co-operation received from local voluntary organisations was gratefully accepted.

To supervise and co-ordinate all the work of the regional, county and divisional functions in the health education field at County level on both the health and education sides, the County Health Committee approved the appointment of a Health Education Officer to take up duty in the ensuing year.

Chiropody.

The Council's chiropody service came into operation on the 9th May, 1960. The scheme was prepared as part of the arrangements for the prevention of illness under Section 28 (1) of the National Health Service Act, 1946, and the Minister of Health in approving proposals suggested that at least in the early stages priority should be given to the elderly, physically handicapped and expectant mothers.

So far as the elderly are concerned the voluntary bodies providing this service agreed to continue their scheme with financial help from the County Council.

Until the 30th June, 1961, only expectant mothers and persons registered as "substantially and permanently handicapped" were administered directly by the Council through the divisional health organisation. On the 1st July, 1961, however, it was decided to amend the scheme and as from that date any development of the chiropody services for the elderly as far as surgery visits and domiciliary visits are concerned have been made wherever possible by extending the Council's direct service. The direct service was also extended to include the blind and partially sighted. In addition to payment to voluntary associations in respect of chiropody clinic sessions, payment also continued where they had hitherto provided a surgery and domiciliary visiting service. It was apparent, also that the scheme involving voluntary associations needed some revision in the light of experience due principally to the need to introduce payment of uniform fees and travelling expenses to all chiropodists being employed by them. These payments were standardised as from 1st July, 1961.

The scale of payments to chiropodists under the Council's direct service were also altered where necessary to correspond with the scale of fees in respect of which grants were made to the voluntary associations. The chiropody treatment which is given under both the direct scheme and through the voluntary associations costs the patient 3s, for each treatment but free treatment is available for those unable to afford this fee.

In respect of the year 1961 grants totalling £8,579 were paid to voluntary bodies providing chiropody services and the cost of the direct service provided to expectant mothers, handicapped persons, the blind and partially sighted, and elderly persons, amounted to £937 (after deducting contributions received from patients in each case).

Particulars of persons treated during 1961 are as follows:—

Treatment provided by voluntary bodies-

No. of elderly persons treated	 ***	 	8,666	(6,677)
Total No. of treatments given	 ***	 	41,610	(24,545)

Treatment provided directly under the County Council Scheme-

No. of expectant mothers treated				21	(9)
No. of handicapped persons treated			***	276	(101)
No. of registered blind or partially	sighted	treated		25	*
No. of elderly persons treated				888	*
Total No. of treatments given				3,307	(391)

The figures in brackets relate to period May-December, 1960.

^{*} Direct scheme for these persons not in operation until 1st July, 1961.

HOME HELPS.

Administration of the Scheme.

The principal features of the County Council's Scheme for the provision of home help remain as in previous years.

Establishment.

The establishment of equivalent full-time helps for the financial year ended the 31st March, 1962, was 568.5. The average number of equivalent full-time helps employed weekly throughout the calendar year was 532.7 an increase of 17.4 above the previous year.

Supervision.

During the year the Divisional Supervisors paid 7,143 first visits, 14,422 revisits and 3,407 miscellaneous visits, a total of 24,972 compared with 27,011 for the previous year.

The Scope of the Scheme.

The total number of cases helped during 1961 was 9,015, an increase of 113 or 1.25 per cent. over 1960. The number of acute cases and chronic sick (including the aged and infirm) increased by 3 and 256 respectively, whilst the number of maternity and tuberculosis cases decreased by 128 and 18 respectively.

The following table gives an analysis of the services provided to the various types of cases in the County as a whole. The figures given include statistics relating to Woking U.D. for the whole year.

Type of	case.	Number of cases helped during 1961.	Hours of service given during 1961.	Average total hours of service per case.	Average No. of hours service per case per week,	Average duration of service per case in weeks,	Average No. of eases being helped per week.
Maternity		 2,331 (25.9%)	136,009 (14.0%)	58	23.3	2.5	106 (3.3%)
Acute	***	 1,613 (17.9%)	49,250 (5.1%)	31	7.3	4.2	125 (3.9%)
Chronie		 4,981 (55.3%)	771,558 (79.4%)	155	4.9	31.6	2,963 (91.5%)
Tuberculosi	8	 90 (.9%)	146,59 (1.5%)	163	6.1	26.7	43 (1.3%)
County	1961	 9,015 (100%)	971,476 (100%)	108	5.7	19.1	3,237 (100%)
County	1960	 8,902 (100%)	1,019,311 (100%)	116	6.0	19.3	3,206 (100%)

The table on page 57 shows Divisionally and for the County as a whole the average number of equivalent full-time helps employed weekly throughout the year, the number of cases helped in each of the four categories and the percentage of time spent on (a) service to patients; (b) travelling; (c) sickness; and (d) holidays.

The table on page 56 shows Divisionally and for the County as a whole the average weekly number of cases helped, the average hours of service per case per week, and the average duration of service per case in weeks.

It will be seen that, over the County as a whole, the total number of cases attended weekly continued to rise during the year, whilst the number of full-time equivalent home helps increased accordingly.

Provision of the services of special home helps to problem families is included under the paragraph on the Prevention of the Break-up of Families.

Whiteley Village Homes, Walton-on-Thames.

In 1959 the Council agreed to be financially responsible for any deficit incurred by the Whiteley Homes Trust in providing home help assistance to elderly persons in their homes in Whiteley Village, who could not afford to pay the full cost of the service.

During 1961, 96 cases received a total of 6,364 hours service.

Neighbourly Help Scheme.

During the year the Council agreed, for a trial period of one year, to the setting up of a Neighbourly Help Scheme to be run in conjunction with the Home Help Scheme. Under this scheme near neighbours are given a weekly payment which varies between 10s., and £2 for looking after old people living alone, or other suitable cases, by paying them frequent visits during the day and carrying out, as required and in their own time such jobs as shopping, lighting fires, preparing meals and cleaning.

The scheme, which was introduced in September 1961, began slowly but was later being increasingly used and gave evidence of becoming of great benefit to the elderly and lonely. The home help service is also deriving benefit as the employment of "good neighbours" helps to combat the shortage of home help.

			Average	-	otal number o	Total number of cases belyed during the year.	during the yea	ıf.	Lecen	Percentage of Home Helps' time spent on	Helps' time sp	ent on
Division.	Population mid-1961.	Acreage.	F/T Helps employed weekly during 1961.	Maternity.	Acute.	Chronic.	T.B.	Total.	Service to patients.	Travelling Time.	Sickness,	Holidays.
North-Western	242,250	84,592	8.89	426	188	454	11	1,082	84.9	3.1	6.9	6.1
Central	229,920	42,841	64.2	426	286	762	10	1,484	84.5	5.6	4.3	9.6
North Central	206,070	24,128	71.0	304	135	815	11	1,265	84.7	4.6	4.5	6.2
Southern	148,610	125,760	10 00	180	83	383	9	652	84.0	27	7.4	4.4
South-Eastern	114,110	22,414	40.3	348	385	271	6	1,013	87.5	2.1	4.3	6.1
Northern	79,690	6,628	46.4	106	69	455	9	626	82.6	7	7.4	6.6
South-Western	179,200	127,026	53.8	264	299	413	10	186	86.6	5.1	5.9	5.4
North-Eastern	188,400	9,381	129.2	182	П	1,077	22	1,394	85.8	5.3	6.2	5.7
Merton and Morden U.D.	67,620	3,237	42.0	7.5	77	363	6	161	83.6	6.9	5.3	97.00
Mitcham M.B	63,790	2,932	50.00	64	43	393	00	208	82.5	4.9	6.9	0.7
Wimbledon M.B	56,990	3,212	35.0	43	24	321	1.	395	82.1	5.4	6.2	6.3
Mid-Eastern	080'68	6,391	26.5	95	19	351	2	819	85.53	6.8	6.9	0.0
Boddington and Walling- ton M.B.	32,590	3,045	15.5	59	36	808	1	304	81.4	7.0	6.4	10
Carshalton U.D	56,490	3,346	11.0	36	31	143	7	214	83.7	6.4	5.3	979
County 1961	1,477,330	449,161	532.7	25.9%	1,613	4,981	06 e.	9,015	84.3	4.7	5.3	5.7
County 1960	1,461,180	449,161	515.3	2,459	1,610	4,725	108	8,902	84.6	4.6	5.1	5.7

			Ave	age weekly	Average weekly number of cases	modern modern						A Visage ser vice per case.		-				
						271	Por		Mater	Maternity.	Ac	Acute.	Chris	Chroale,	T.	T.B.	To	Total.
Division.	×	Maternity.	Acute.	Chronie.	T.B.	Total.	equivalent F/T Home Help employed.	10,000 popula- tion.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.
North-Western (including		- 12	17	247	7	292	4.7	12.1	21.0	2,5	14.1	3.6	9.6	27.8	8.6	26.4	7.8	14.2
Central	(gu	81	00	430	01	462	7.2	20.2	21.4	9.5	7.6	1.5	77	29.0	6.0	12.3	4.9	16.4
North Central	1	15	=	202	7	535	7.5	25.9	24.5	10	6.8	4.2	4.0	32.3	4.9	20.6	4.6	01
Southern	1	00	00	197	01	215	9.9	14.5	25.4	9.9	8.7	5.1	77	26.8	7.7	16.3	5.4	17.2
South-Eastern	1	16	38	175	9	235	8.5	20.6	50.03	4.0	5.7	5.1	4.7	33.7	5.4	34.5	6.3	12.1
Northern	-	10	1-	266	4	282	6.1	35.7	18.6	2.6	4.1	6.6	5.6	30.2	3.5	32.0	5.8	23.4
South-Western	:	122	15	268	21	303	5.6	16.9	26.8	4.9	7.4	3.6	5.6	33.5	07.0	23.0	9.9	15.9
North-Eastern	1	10	13	724	15	762	6.6	40.5	25.0	10.7	8.6	6.2	5.5	35.1	8.8	32.4	6.9	28.9
Merton and Morden U.D	0	4	+	250	j=	265	6.3	39.5	21.0	3.1	8.3	5.2	5.3	35.4	6.9	40.1	9.6	28.3
Mitcham M.B	:	4	9	270	4	284	5.4	44.4	22.7	5.5	8.6	7.1	6.0	36.0	8.5	23.4	6.5	29.1
Wimbledon M.B	-	01	60	204	7	213	6.1	37.4	26.5	t- oi	11.2	7.0	5.2	33.0	6.7	33.4	5.7	01 00 01
Mid-Eastern	1:	10	9	115	60	255	10.8	25.3	20.6	4.0	4.5	4.9	3.8	30.9	3.6	34.8	4.2	22.4
Beddington and Wallington	gton	00	,	107	1	114	7.4	35.6	20.4	10	4.3	5.5	4.4	26.7	3.0	12.6	4.8	19.4
Carshalton U.D		01	21	104	60	1111	10.1	19.8	20.9	1:0	4.9	1.4	3.1	38.1	3.6	40.9	3.5	27.2
County 1961		3.4%	3.9%	3,023	1.4%	3,311	6.3	P.25.	23.3	10	5. 6.	4.2	4.9	31.6	6.1	26.7	5.7	1.91
County 1960	1	3.7%	5.4%	2,859	1.7%	3,206	6.2	21.9	23.7	9.6	21.5	5.7	01	32.0	6.9	27.1	6.0	19.3

MENTAL HEALTH SERVICES.

Administration.

All matters relating to mental health in Surrey are referred to the Mental Health Services Sub-Committee of the County Health Committee. The Sub-Committee consists of 21 members and meets seven times a year.

Two specialist assistant medical officers are employed to deal with the examination of mentally subnormal persons. Both these medical officers are approved for giving medical recommendations under Section 28 of the Mental Health Act. Towards the end of the year a Senior Medical Officer was appointed to be responsible for the medical administration of the mental health service.

An assistant superintendent health visitor is responsible for the organisation of the occupation and training centres and for the admission of trainees to these centres. The eight training centres provided places for 455 trainees at the end of 1961, compared with 410 places at the end of 1960. Each centre has a supervisor who holds the diploma of the National Association for Mental Health or other appropriate qualification and other staff in accordance with the number of trainees on the register. A speech therapist and a physiotherapist are also employed to treat trainees at the centres.

A senior mental welfare officer, his deputy and three clerical staff stationed at County Hall are responsible for the day-to-day lay administration of the service. The senior mental welfare officer and his deputy are responsible for all the work of registration and community or hospital care of the mentally subnormal, supervision of the field staff of seventeen mental welfare officers and three trainees, the staffing of the training centres and co-ordination of all the services for the mentally ill and subnormal.

A psychiatric social worker was appointed late in 1961 to be responsible for the after-care visitation of the mentally ill and to act in a consultative capacity to the growing team of mental welfare officers.

Co-ordination with Regional Hospital Board.

Co-operation with the psychiatric hospitals and hospitals for the subnormal, to which Surrey patients are admitted, is excellent and much benefit is derived by the Council's officers from the help and advice given by the specialist medical staff of these hospitals.

The waiting lists for hospitals for the subnormal still remain rather long, but really urgent cases can usually be accommodated at one of the four hospitals to which Surrey cases are admitted. The total waiting list at the end of 1961 was 100.

There are 19 psychiatric out-patient clinics in the County staffed by medical officers from the psychiatric hospitals and hospitals for the subnormal under arrangements made by the Regional Hospital Board.

Work Undertaken in the Community.

A psychiatric social worker, 17 male mental welfare officers, 3 trainee mental welfare officers, 6 specially-trained health visitors and 173 general health visitors (part-time) are responsible for visiting mentally ill and subnormal persons in the community and providing care and after-care according to their needs. Although much of the after-care visiting of former hospital patients is still being carried out by psychiatric social workers attached to the hospitals, a good deal of this work is now being passed to the psychiatric social worker, the specially-trained health visitors and to the male mental welfare officers. It is probable that this trend will continue, and a still greater call for the development of local mental health services will be made during the next few years.

During 1961 2,728 visits to female mentally subnormal patients and boys under 16 in the community were paid by female staff; 1,524 visits to males over 16 in the same group were paid by male staff.

Recuperative holidays and short-term care for the mentally ill and subnormal were provided in many cases. A number of patients have been maintained in after-care hostels administered by the Mental After Care Association, the S.O.S. Society and other bodies.

Mental Illness.

The total number of cases reported to mental welfare officers during 1961 was 3,086. These were made up in the following categories:—

				He	ow Dealt	With.					
enqu refer	ion after ury or red to partments.		rvation . 25.		tment . 26.	Eme Sec	rgency c. 29.	Info	rmal.	Miscel	llaneous
М.	F.	М.	F.	M.	F.	М.	F.	M.	F.	M.	F.
140	217	96	134	152	184	204	373	475	730	161	220

Surrey patients are eligible for admission to the following mental hospitals, the appropriate hospital being decided by the patient's home address: Banstead, Brookwood, Horton, Netherne and West Park. St. Helier General Hospital still has a number of beds for female psychiatric patients: these special beds are staffed by medical officers from Netherne Hospital.

Subnormality and Severe Subnormality.

Investigation and registration of all new cases of subnormality and their community care or admission to hospital or guardianship are the responsibility of the mental health services staff at central office. The two specialist medical officers combine this work with the investigation of E.S.N. children for the local education authority.

Subnormal patients are still admitted according to the part of the County in which they live and their age and mental grade to the following hospitals: Botleys Park Hospital, Chertsey; The Fountain Hospital, Tooting; The Manor Hospital, Epsom; Royal Earlswood Hospital, Redhill.

The Physician Superintendents of these four hospitals continue to be most helpful in seeing various patients by appointment and giving the local health authority officers the benefit of their advice. They are also extremely helpful in taking patients for short-term emergency periods. During 1961, 66 patients were accepted for short-term care by the hospitals and 12 patients were sent by the Council to private homes, etc., for similar short-term care.

During the year 11 patients were admitted to hospitals or placed under guardianship under compulsory powers under the Mental Health Act 1959 and 87 patients were dealt with informally. Of the statutory admissions, 8 were Court cases.

The following tables show particulars of all mentally disordered persons referred to the Council during 1961, and the total number of patients under local health authority care on 31st December, 1961, in their various categories:—

Cases referred to Local Health Authority during 1961.

thioners			Men	Mentally III.			Psych	Psychopath.			Subnormal.	mal.		Seve	rely Su	Severely Subnormal.	1		Totals.	18		
itioners	Referred by.	M.	Juder ge 16 F.	×	an	Ur.	der 16 F.	16 a 0.v	er F.	Unc age M.	le F.	16 ar over		Unde age 1	F @ Br.	16 an over M.	- F	Und age	F. E.	16 and over M. F.	1	Grand Total.
General practitioners - - 334 604 - - 3 7 - - - 1 1 1 - 3 1 1 1 Hospitals, on discharge from in. 1 - 162 197 - 1 - - 4 4 - - - 1 1 - <		(1)			(4)	(2)	(9)	6	(8)	(6)	(01)	(11)	(13)	(13)	(14)	(15)	(16)	(11)	(18)	(61)	(20)	(21)
and the conting outpatient and the continue of the cont	1					1	1	60	1-	1	1	1	1	1	-	1	60	-	-	337	419	953
ordering out-patient ————————————————————————————————————	(b) Hospitals, on discharge from in- patient treatment	4 :	1			1	-	1	1	1	1	+	7	1	1	1	1	-	-	166	201	369
on authorities 6 10 22 15 10 6 16 16 16 16 178 85 69 4 3 5 1 - 5 1	(c) Hospitals, after or during out-patient or day treatment				21	1	1	1	1	1	-	1	-	9	1-	1	1	9	œ	13	65	02
85 69 4 3 5 1	ocal education authorities	-			1	1	1	1	1	9	10	01	15	10	9	1	1	16	16	02	15	69
486 725 7 1 12 8 6 12 30 24 7 7 42 32	Police and courts				69	1	1	-	00	1	1	10	-	1	1	1	1	1	1	3	73	167
			-		725	1	1	1	-	120	00	9	120	30	70	1-	1-	5	32	909	745	1,325

Guardianship Cases.

-	60	5
1	-	04
-	01	65
1	1	1
1	1	1
1	-	1
- 1	1	65
1	1	1
1	1	1
1	1	1
1	-	1
- 1	1	1
1	1	1
- 1	1	1
- 1	1	1
- 1	1	1
1	1	1
1	1	1
1	1	1
1	1	1
1	1	1
L.H.A.	anship	1
up of l ing the 60)	guardi	
rdiansh an dur ' (Sect.	under	1
Admissions to guardianship of L.H.A. or other guardian during the year ended 31.12.61.— On court order (Sect. 60)	Total number under guardianship at 31.12.61— L.H.A	Other

		Menta	Mentally III.			Psychopath.	opath.	11-19		Subnormal.	mal.		Sev	erely su	Severely subnormal.	al.		Totals.	als.		
	Under age 16 M. F.	Under age 16	16 and over M. F	and er F.	Under age 16 M. F	Under age 16 f. F.	16 and over M. F	er F.	Under age 16 M. F.	ler 16 F.	16 and over M. F	r F.	Under age 16 M. F.	lor 16 F.	16 and over M. F	ard F.	Under age 16 M. F.	ler 16 F.	16 and over M. F	r F.	Grand Total.
	(3)	(3)	(3)	(4)	(5)	(9)	(7)	(8)	(6)	(10)	(1)	(12)	(13)	(14)	(11)	(16)	(11)	(18)	(19)	(20)	(21)
(a) Attending day training centre	11	11	11	11	11	11	11	11	01 01	20 00	4 01 01	50 A	133	13	20 00	63	155	109	52 10	100	446
(b) Resident in a residential training centre. Awaiting residence therein	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11
(c) Receiving home training Awaiting home training	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11	11
(d) Resident at L.A. expense in residential Homes/Hostels	11	1 1	01	01 60	11	11	11	11	11	11	1 ∞	1 00	01 -	9 01	01	61	61 -	9 61	9 01	61 82	1 98
(e) Receiving home visits and not in- cluded under (a) to (d)	1	1	61	173	1	1	-	60	1-	00	247	268	196	425	136	100	629	51	407	553	1,073
(f) Others (including not yet visited)	1	1	1	20	1	1	1	1	60	1	10	9	+	1-	-	1	1-	œ	9	56	47
(g) Number of patients involved at (a) to (f)	1	-	100	198	1	1	-	60	34	30	286	60 64 60	224	191	200	176	251	184	206	67.4	1,615
Number of patients in L.H.A. area on waiting list for admission to hospital at 31.12.61— (a) In urgent need of hospital care		I	I	1	1	1	1	1	1	1	1	-	60	7	-	01	60	4	-	60	=
(b) Not in urgent need of hospital care	1	1	1	1	1	1	1	1	10	67	9	1-	58	16	13	12	333	18	19	19	89
Number of admissions for temporary residential care. (a) To hospitals	11	11	11	11	11	11	- 11	11	64	61	4	= 01	8 10	16	10	00	0.50	18	0	19	12 66

Training Centres.

There are eight training centres for subnormal persons at the following addresses:-

Ewell ... Old Schools Lane, Ewell.

Guildford ... Pond Meadow, Park Barn, Guildford.

Kingston Methodist Church Hall, Victoria Road, Kingston.

Morden ... Bordesley Road, Morden.

Purley Railwaymen's Hall, Whytecliffe Road, Purley.
Reigate Methodist Church Hall, High Street, Reigate.
Sutton ... 3, Robin Hood Lane, Sutton (males over 16 only).

Weybridge ... Mayfield Hall, Mayfield Road, Weybridge.

The centres at Guildford and Morden are both purpose-built. Sites at Ham and Caterham have now been acquired from the Regional Hospital Board and purpose-built centres are to be erected on these sites to replace the rented premises at Kingston and Purley respectively.

In May, 1961 the Sutton Centre became an Adult Male Work Unit, accommodating males over 16 from the Sutton, Morden and Ewell Centres so that industrial projects could be undertaken.

In the first instance large envelopes were made for the County Council, and this was followed by accepting from local industry assembly work, and packaging. These contracts called for the use of simple hand operated machinery.

The money earned from these contracts is paid to the young men employed on the projects, and as an incentive the money is distributed according to their ability and personal effort. Although their earnings were small they much prefer working on these projects to being occupied on handicrafts, and the unit is proving highly successful.

The development of these units will depend upon an adequate supply of work, and it is proposed to provide this by manufacturing small articles and undertaking assembly work for local industry and public bodies.

NURSING HOMES (PUBLIC HEALTH ACT, 1936).

During the year the Committee approved the registration, or alteration in registration of six nursing homes. On the 31st December, 1961 there remained 41 registered nursing homes and 15 exempted homes.

NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

The County Council as local health authority are responsible for the registration and supervision of certain nurseries and of persons who for reward receive children into their homes to look after them. At the end of the year 1961 the following number of premises and of persons had been registered:—

		Number registered at 31.12.1961.	Number of children provided for.
Premises	 	 69	1,315
Daily Minders	 	 267	2,682

PREVENTION OF AIR POLLUTION.

Clean Air Act, 1956.

SECTIONS 11-15. SMOKE CONTROL AREAS.

The above sections of the Clean Air Act, 1956, empower County District Authorities, by order confirmed by the Minister, to declare the whole of their district or any part thereof to be a smoke control area. Such order would provide that if smoke is emitted from a chimney of any building within the smoke control area, the occupier of the building would, subject to certain provisos, be guilty of an offence. The County District is also required to bear part of the expenditure in respect of necessary adaptations to fireplaces in private dwellings and is empowered to make grants towards fireplaces in churches, chapels and buildings used by charities, etc.: the Minister may make exchequer grants to County Districts in respect of certain of these expenditures.

These sections were brought into effect by the Clean Air Act (Appointed Day) Order, 1956, on the 31st December, 1956, and including one smoke control area that commenced to operate in Richmond last year, four smoke control areas are now operating in the County. The three that commenced to operate during 1961 are in the Boroughs of Barnes and Beddington and Wallington, and the Urban District of Carshalton. Since my last report, seven County Districts have submitted further proposals to the Minister to declare parts of their districts to be smoke control areas. The County Districts and their proposals are:—

	Proposed date of commencement.	Site.	Number of dwellings.	Remarks.
Barnes No. 3 Order	15th Nov., 1962	Extension of No. 2 area southwards to the Hounslow loop of railway line— along Queens Ride, Putney—to the eastern—borough boundary	1,562	Only practical difficulties are those of explaining to applicants that they must not only adapt their fire-places, but that such adaptations can only rank for grant if carried out in the precise period between confirmation and the coming into operation of the order.
Beddington and Wallington No. 3 Order	1st Oct., 1963	Triangular area bounded by Sandy Lane, Woodcote Road and Stafford Road	1,179	
Carshalton No. 2 Order	1st Oct., 1962	Bounded by the middle of BuckhurstAvenue on the south, the middle of Green Wrythe Lane on the west and bounded by Bishopsford Road on the north and the River Wandle on the east	3,529*	*Total for Nos. 1 and 2 Control Orders. The programme provides for further Control Orders each year until the whole of the district is covered by 1971.
Kingston-upon- Thames No. 2 Order	1st Oct., 1962	Bounded on the north by the railway line commencing at the centre of Richmond Road—eastwards to junction of London Road and Clifton Road. Boundary then turns south-	650	Proposed area No. 3 which has not yet been submitted to the Minister contains 1,270 dwellings.
		west — centre of London Road to No. 88 — then south- wards via footpath —rear of Minerva Road — Fairfield South — continuing along centre of		
		Fairfield South and Orchard Road — junction with Brook Street — North- wards along centres of Brook Street and Eden Street—thence centres of Clarence Street and Rich- mond Road to point of commencement		
Malden and Coombe No. 2 Order	1st Oct., 1962	Malden Golf Course area bounded by Coombe Hill Road, Beverley Brook, main railway line, Coombe Road and Traps Lane	655	Areas No. 4, 5, 6 and 7 are to be dealt with by 1966.
Merton and Morden No. 3 Order	1st Oct., 1963	Portion of West Barnes Ward—east of railway	969	Area No. 1 originally proposed for commencement on 1st October, 1961, will not commence to operate until 1st October, 1962, along with area No. 2.
Richmond No. 3 Order	1st Oct., 1962	Bounded on the south by No. 2 area, on the west by the river, on the north by the Vineyard (the Park Ward bound- ary) and on the east by Church Road, Marlborough Road and Queens Road (the Park Ward boundary) and the Sudbrook Ward boundary to the No. 2 area	1,877	The No. 2 Smoke Control Order mentioned in 1959 and 1960 was delayed and the date of operation postponed from 1st October, 1961, to 1st January, 1962.

In the Borough of Guildford, two Council-owned industrial estates (Station Meadow and Midleton Estates) are recognised smokeless zones. The Council imposes this by conditions in the leases requiring that no smoke shall be produced. Certain other county district authorities have considered the question of smoke control areas, but have so far not submitted proposals to the Minister.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944

The following applications from Local Authorities for the Council's observations to the Ministry of Housing and Local Government under Section 2 (2) of the Act was received during 1961 and reported to the Rivers and Streams Committee:—

Authority.	Scheme.	Estimated Cost.	Committee Decision.
Dorking U.D.C.	Drainage — Box Hill Soil Drainage Scheme	£95,000	Scheme approved in principle.
Dorking and Horley R.D.C.	Drainage—Buckland Scheme	£48,352	Scheme approved in principle.
Guildford R.D.C.	Main Drainage — Tilling- bourne Valley Phase VIa	£128,802	Recommended application to Ministry of Housing and Local Government for a grant.
Guildford R.D.C.	Main Drainage — Peasmarsh (resubmission)	£47,879 (estimated cost in 1949 was £19,325)	Scheme approved in principle originally in 1949.
Haslemere U.D.C.	Drainage — Hindhead and Churt Road Drainage Scheme	£232,000	Scheme approved in principle.
Woking U.D.C.	Drainage — Horsell North Drainage Scheme	£42,200	Scheme approved in principle.

REFUSE DISPOSAL.

Five new applications under Section 94 of the Surrey County Council Act, 1931, were received during the year, all of which were approved.

Six renewals were granted and at two sites tipping was completed and these refuse tips ceased to operate. The total number of approved refuse dumps in the County is nineteen and all are conducted satisfactorily.

MILK AND DAIRIES.

The Milk (Special Designation) Regulations, 1960.

Under these regulations the County Council are responsible as from 1st January, 1961, for granting dealers' Licences, except for a few kinds which are granted by the Minister of Agriculture, Fisheries and Food, to all premises which are situated within the area for which the Council is the Food and Drugs Authority at or from which the milk is to be pasteurised, sterilised or sold as the case may be. These licences now permit sales outside as well as inside the area of the licensing authority, supplementary licences having been discontinued. The licences issued under the Regulations continue in force until the expiration of the period of five years ending with 31st day of December, 1965, and in any fifth succeeding year.

As mentioned in my report last year arrangements were made for the Public Health Inspectors of the County Districts within the area for which the County Council are the Food and Drugs Authority to carry out as agents of the County Council investigations prior to granting a new licence and carrying out the sampling and inspections as necessary under these regulations. All the Public Health Inspectors concerned have continued to give valuable co-operation during the past year and their services are much appreciated. Their activities in this respect are co-ordinated by the County Medical Officer and financial arrangements in respect of the sampling have been agreed upon in conjunction with the County Treasurer.

The following table shows the number of different types of dealers' licences which were issued from 1st January, 1961, onwards and which were still in force on 31st December, 1961, in the area for which the County Council is the Food and Drugs Authority.

Type of Licence.		Number in force on 31st December, 1961.
Dealers' (Pasteurised) Licences		. 6
Dealers' (Tuberculin Tested) Licences		. 9
Dealers' (Pre-packed Milk) Licences—Tuberculin '1	Tested	103
Dealers' (Pre-packed Milk) Licences—Pasteurised		. 143
Dealers' (Pre-packed Milk) Licences—Sterilised		. 109
		370

Twenty-three of the Dealers' (Pre-packed milk) licences and the Dealers' (Tuberculin Teste:1) licences quoted in these figures were new applications dealt with during 1961.

No new dealers (Pasteurised) licences were granted during the year and the number of pasteurising establishments operating on the 31st December, 1961, remained at six.

No applications in respect of sterilising establishments have been received.

The following give details of sampling during 1961 in the districts for which the Council is the Food and Drugs Authority.

SAMPLING IN RESPECT OF DEALERS' LICENCES.

		Pateurised.	Sterilised.	Tuberculin Tested (Pateurised).	Tuberculin Tested (Raw),
No. of milk samples taken	 	414	47	244	126
Failed phosphatase test	 			_	
Failed methylene blue test	 	3		1	8
Failed turbidity test	 		1	_	_

SAMPLING AT PASTEURISING ESTABLISHMENTS.

			Pasteurised.	Tuberculin-Tested (Pasteurised).
No. of milk samples taken		 	 306	4
Failed phosphatase test		 	 3	
Failed methylene blue test	***	 	 3	_

Tubercle Infected Milk.

No notifications of milk produced at farms in Surrey having been found to be infected with the tubercle bacillus were received during 1961. The whole of the County has been scheduled as a "specified" area by the Minister of Health since 1954 and all sales of milk by retail for human consumption, and catering sales, have to be either pasteurised, sterilised or tuberculin tested. The tuberculosis eradication scheme of the Minister of Agriculture, Fisheries and Food under which all bovines in Surrey herds not already attested were tested with tuberculin and any animals proving to be tuberculous, however slight, slaughtered, is also now complete. There is no doubt that both of these schemes have been largely instrumental in reaching the satisfactory position which now obtains.

FOOD AND DRUGS ACT, 1955.

I am indebted to the Chief Officer of the Public Control Department for his report on the work of his department in respect of the above Act. Extracts from his report are given below.

The County Council is the Food and Drugs Authority for eleven of the thirty-three County Districts in the Administrative County and the following table gives particulars of samples taken within the Council's Food and Drugs Area for examination by the Public Analyst, or for misdescription or irregularities with regard to labelling, during 1961. Comparative figures for 1959 and 1960 are also given:—

			Milk.		Food o	Food other than milk.			Drugs.			Totals.		
		1961	1960	1959	1961	1960	1959	1961	1960	1959	1961	1960	1959	
Examined		710	693	703	251	264	256	11	13	7	972	970	966	
Adulterated or Irregular		19	20	12	31	17	22	1		-	51	37	34	
Percentage Adulterated Irregular	or 	2.67	2.88	1.71	12.35	6.44	8.59	9.09	-	-	5.24	3.81	3.52	
Samples per 1,000 of aver annual population	age	2.08	2.08	2.11	0.72	0.78	0.77	0.03	0.04	0.02	2.81	2.90	2.90	

Estimated Population.

Census, 1961		 	345,396
Mid-Year, 1960	***	 	337,630
Mid-Year, 1959		 	332,550

In classifying the samples as either genuine, adulterated or irregular, the Public Analyst has taken into consideration all relevant Regulations and Orders made under the Food and Drugs Act, 1955.

During the year 91 varieties of food and 11 different drugs formed the total of 972 samples taken. The results of sampling generally are similar to those of recent years.

WELFARE SERVICES.

The County Medical Officer continues to be responsible to the County Welfare Committee for the health and medical aspects of the services which they provide, and, in particular, for the services provided under Section 29 (welfare arrangements for the blind, deaf, and other handicapped persons etc.) and Section 30 (voluntary organisations for disabled persons' welfare) of the National Assistance Act.

Blind Welfare.

REGISTRATION OF THE BLIND.

The number of blind persons whose names were on the Register at the end of 1961 was 2,543 compared with 2,688 at the end of 1960.

The following figures of new cases registered in the year of persons in each age group on the Register were compiled for statistical purposes on the 31st December, 1961.

					New Cas	SES REGISTERE YEAR.	D DURING	Total Registered Blind Persons.				
	Age	Grou	ip.		Male.	Female.	Total.	Male.	Female.	Total.		
Under	1					_	-	-	-	-		
1		111	111	411			-					
2		400						1		1		
3	***		444	***	2	-	2	3		3		
4			***	2711	-	-	_	-	-	-		
5-10				***		1	1	10	11	21		
11-15		200	***		-	200	and .	16	15	31		
6 - 20		***	***		1	1	2	11	9	20		
21-29		***			1	1	2	23	25	48		
10-39				. 1 111	3	1	4	68	36	104		
0 - 49		***		411	3	4	7	91	65	156		
50-59					3	10	13	127	132	259		
10-64		***	111	100	6	11	17	71	96	167		
55-69					10	14	24	92	126	218		
70-79		***			28	48	76	210	417	627		
80-84					22	30	52	124	256	380		
35-89					9	44	53	76	263	339		
00 and	over		***	***	2	8	10	38	131	169		
Unknov	vn	***	***	***	-	-	-		-	-		
			-		90	173	263	961	1,582	2,543		

In addition to the Register of Blind Persons, a Register of Partially Sighted Persons is maintained and these number 465 as compared with 462 at the end of 1960.

Registration of both blind and partially sighted persons is of a voluntary nature. It therefore follows that the above figures do not necessarily represent the actual numbers of such persons in the County. Every effort is made to ensure that the benefits of registration are known, and many referrals are now received from National Assistance Officers, Almoners, Health Visitors, Welfare Officers, etc.

Before the name of any person is included on the Blind or Partially Sighted Register, medical certificate Form BD8 must be completed by an Ophthalmologist. During the year 470 forms were received relating to new cases and re-examinations as compared with 545 during 1960. The following table is a summary of the number of new cases in which forms BD8 show that treatment (medical, surgical or optical) is required.

- (A) Follow-up of Registered Blind and Partially Sighted Persons.
- (I) Number of cases registered during the year in respect of which the Form BD8 recommends:-

		Cataract.	Glaucoma.	Retrolental Fibroplasia.	Others.
(a) No treatment		36 40	31 16	=	162 70
*(II) Number of cases at (I) (b) above which on action have received treatment	follow-up	14	11	-	44

^{*} Of the number who have not received treatment, 6 have died and 3 have moved from the area. Many recommendations for treatment are qualified by the reservation "when general condition permits."

HOME TEACHERS FOR THE BLIND.

The complement of twelve Home Teachers remained unchanged during the year although it was agreed to increase the establishment to 16 during 1962.

Their duties include domiciliary visits to blind and partially sighted persons to afford tuition in reading and writing embossed type, handicrafts, and to assist generally in helping them to adjust themselves to the handicap of blindness, 21,187 such visits were made this year. Ten handicraft classes functioned during the year and twenty Social Clubs were in being. The latter are organised by local voluntary Committees and again I welcome this opportunity of expressing my thanks to these Committees for their most valuable and appreciated contribution to the blind welfare service in the County.

EDUCATION, TRAINING AND EMPLOYMENT.

The County Council provide for the care of blind pre-school children under Section 22 of the National Health Service Act, and for the special educational treatment of blind school children under Section 33 of the Education Act, 1944. The four blind children of under school age in the County remained at home during the year and of the 52 blind children of school age, 34 attended Schools for the Blind, not at school 2 and 16 were ineducable on account of other defects, 2 being in mental hospitals, 7 in mental deficiency institutions, and 7 at home or elsewhere.

Employment.

The County Council continues to pay a capitation fee to the Royal National Institute for the Blind in respect of the "Placement Service" which undertakes the placing for employment of blind persons between the ages of 16 and 59 years in open industry and commerce.

During the year the Placement Officer made "First" calls on 11 registered persons, 4 of whom were recommended for training or employment. He paid 125 visits on "Follow up" and "Service" calls and 120 calls on firms to interest them in the employment of blind persons. In addition, the Training Officer paid 8 calls to investigate the suitability of employment in certain factories and settled in newly employed persons of whom there were 11. There were 4 replacements during the year. Placements included the following trades: capstan operating, tapping, typing, fly press operating, dark room technician and engineering consultant.

Workshops for the Blind, Home Workers' Scheme and National Library.

There are at present 17 blind persons employed in Workshops for the Blind, and the County Council continues to pay capitation fees to the Workshop and supplementation of earnings to the blind employees who are engaged in basket making, brush making, mattress making, knitting pin moulding and machine knitting. Capitation fees are also paid to the Royal National Institute for the Blind in respect of the 39 blind persons whose work is supervised by their Home Industries Department. Augmentation is paid to the blind workers whose occupations are similar to those of the "workshop employee" but who, for geographical or domestic reasons, are unable to travel to the Workshops which, with the exception of Leatherhead, are situated in London.

In addition, capitation fees are paid by the County Council to the National Library for the Blind in respect of 266 blind persons who are supplied with Braille or Moon Type Books.

THE SURREY VOLUNTARY ASSOCIATION FOR THE BLIND.

Close co-operation continues to exist between the County Council and the Surrey Voluntary Association for the Blind whose Honorary Secretary is in charge of the Blind Welfare Section of the County Health Department.

The Association supplements the Council's Blind Welfare Service by affording grants to blind persons for holiday and miscellaneous purposes, assists in the maintenance of the wireless sets which are provided by the British Wireless for the Blind Fund, provides equipment and materials for handicraft purposes and generally endeavours to meet the needs of blind persons in the County in matters which are not covered by statutory authority.

Deaf Persons.

As from 1st April, 1961, the Council appointed as its agents the Middlesex and Surrey League for the Hard of Hearing in respect of persons who have hearing difficulties and the Royal Association in Aid of the Deaf and Dumb as regards persons who are deaf or dumb.

The Minister of Health issued a Circular in September, 1961 in which new definitions and categories of the Deaf (formerly called the Deaf and Dumb) were laid down as follows:—

Deaf without speech.

Those who have no useful hearing and whose normal method of communication is by signs, finger spelling or writing.

Deaf with speech.

Those who (even with a hearing aid) have little or no useful hearing but whose normal method of communication is by speech and lipreading.

Hard of Hearing.

Those who (with or without a hearing aid) have some useful hearing and whose normal method of communication is by speech, listening and lip-reading.

The Minister also requested Local Authorities to review the future development of services for the deaf in their areas and during 1961 preliminary steps were taken, in conjunction with the two voluntary organisations, to assess the services at present available and to decide on policy for the future. Valuable help was rendered by members of the County Welfare Officer's staff in this connection.

On 31st December, 1961, the Register of the Deaf contained names as follows:-

Male.	Female.	Totals.
260	204	464
131	340	471
391	544	935
	260 131	260 204 131 340

(As from 1st January, 1962, the Registers of the Deaf will be maintained in accordance with the new definitions and categories set out above.)

Other Handicapped Persons.

Under the Council's scheme for handicapped persons, other than the blind, partially sighted and deaf or dumb, an increasing number of patients received help during 1961 either from the Voluntary Association for Surrey Disabled or from the Council direct. The Voluntary Association are the Council's agents and they exercise the mandatory clauses of the scheme. They also provide ancillary services, e.g. handicraft classes, aids for the handicapped, holidays, transport, etc.; for instance, it is interesting to note that the Voluntary Association was able to help 143 disabled persons to have a holiday in 1961.

In certain approved cases the Council give financial assistance directly to handicapped persons who need to have their homes adapted or equipped so that they may more easily take their place in everyday life and 19 persons were assisted in this way during 1961.

These adaptations range from small jobs, such as the substitution of ramping for steps, to the building of ground floor toilet accommodation for persons who cannot climb stairs. Negotiations are frequently complicated as many factors have to be taken into consideration, among them being the patient's state of health and prognosis, the length of time he is likely to remain in his house, the ownership of the property, the composition of his family, and the possibility or otherwise of obtaining grants or other forms of financial assistance from other sources, including County District Authorities.

The transport of handicapped persons to clubs and classes is a great problem, and a number of voluntary organisations, who have been unable to recruit sufficient voluntary drivers, have been given grants by the Council, to enable them to hire transport, application having been made on their behalf by the Voluntary Association for Surrey Disabled.

A scheme for the provision of car badges to severely disabled drivers was commenced during 1961, and by the end of the year 359 disabled drivers had received badges. The object of the scheme is to ease the difficulty of these persons in finding suitable parking places but the badges confer no legal rights or privileges.

The Council are responsible, under the scheme, for Occupational Therapy, and maintain a team of full-time qualified Occupational Therapists under the direction of a Head Occupational Therapist. Their services are also available for the tuberculous (see page 49).

The provision of suitable housing for handicapped persons is a most difficult problem. The co-operation of County District Councils in certain cases where adaptations were required to property owned by those Councils has been most valuable, and it is to be hoped that Housing Authorities will continue to do all they can for the physically handicapped.

During 1961 the Council sponsored the maintenance of 15 patients in centres where they received training and rehabilitation, or were placed in sheltered workshops.

On 31st December, 1961, the register of "other handicapped" persons contained 2,924 names as follows:—

Under 16 16-64 65 and over	 Male. 175 841 258	Female, 144 1,069 437	Totals. 319 1,910 695
	1,274	1,650	2,924

The corresponding total for 1960 was 2,568.

THE SCHOOL HEALTH SERVICE

AREA AND POPULATION.

The Council is the Local Education Authority for primary, secondary and further education for

the whole of the Administrative County.

The Registrar-General's estimated population of the Administrative County at mid-year 1961 was 1,477,330 which includes 214,000 children between the ages of 5-14 years inclusive. In January, 1962, there were 183,969 children on the registers of 665 county and voluntary schools, a decrease of 697 in the number of children on the school registers compared with January, 1961.

MEDICAL INSPECTION.

Maintained Schools.

Under the provision of the Education Act, 1944, it is the duty of the local education authority to provide for the medical inspection, at appropriate intervals, of pupils in attendance at any school or county college maintained by them, and the authority may require the parent of any pupil in attendance at such school, to submit the pupil for medical inspection in accordance with the arrangements made by the authority. Although the Act places a legal obligation on the parent to submit the child for examination, the parent is free to refuse treatment, if he so desires.

The arrangements for periodic medical inspection are summarised below:-

Primary

(i) On entry
(ii) During year in which age 8 is reached ...
(iv) During year in which age 13 is reached (if more than a year from last routine inspection)
(v) During year in which age 15 is reached ...
(vi) During year in which age 15 is reached ...
(vi) During year prior to leaving school (if more than one year after last routine inspection)

Complete medical examination.

The number of children examined in primary and secondary schools was 72,921 and 35,074 parents were present at these routine inspections. Further details of periodic and other medical inspections carried out during the year at maintained schools are shown in Table 1.

Independent Schools.

Medical inspection and treatment and dental inspection of children attending independent schools are made available on application by the Principal and subject to the school itself being considered efficient. A small number of schools have taken advantage of these facilities which are offered free of cost.

DISEASES AND DEFECTS.

Incidence.

Of the 72,921 pupils examined at periodic medical inspections 8,917 (or 12.3 per cent) were found to be in need of treatment for 10,431 diseases and defects. Table IIA shows these diseases and defects from which it will be seen that 4,573 or 43.8 per cent of them were defects of the nose and throat and of vision and squint. During the year 450 cases of chronic tonsillitis and adenoids were recommended for treatment and 3,048 placed under observation.

There were 17,298 defects found to be in need of treatment in the course of periodic and special inspections in 1961, and 19,244 defects, a proportion of which were found in previous years, were actually treated during the year.

Medical re-examination and following-up.

During 1961 school medical officers carried out 12,657 special inspections and 13,772 re-inspections of children while 10,244 visits were paid by health visitors to the homes of the children for all purposes. An analysis of these is given on page 71.

Physical condition.

Table IA shows the classification of the physical condition of pupils inspected in the periodic age groups under two categories—"satisfactory" (99.5 per cent) and "unsatisfactory" (0.5 per cent).

Personal hygiene.

For a trial period, routine inspection of pupils each term was suspended or reduced during the year in selected schools as part of a general scheme to effect economies and make the best possible use of the health visitors' time. The result is reflected in the figures (table ID) which show, by comparison with 1960, a reduction of over 100,000 inspections although the number of cases found to be infested (595) remained almost unchanged.

Figures for the five years 1957-1961 are given below:-

						1957	1958	1959	1960	1961
Number of vi purposes	sits to S	chools t	y nu	rees for	all	13,266	11,861	11,165	9,969	8,305
Cases with nit	s in the	hair				1,084	878	642	820	577
Cases with lie	e in the	hair	***			113	85	117	64	54
Cases with ve	rminous	bodies				1	3	2	-	5
Exclusions— 1st Time						190	179	107	149	134
2nd Time						23	19	23	15	9
3rd Time				***		6	1	3	3	3

Seven cases of neglect to give proper attention to dirty or verminous conditions were referred to the National Society for the Prevention of Cruelty to Children. Following visits by the Society's Inspectors, treatment was obtained and the cases improved.

MEDICAL TREATMENT.

Minor ailments.

The principal ailments treated at the minor ailment clinics are skin and ear diseases, and external disease of the eyes. Details of the number of such cases treated are included in table III. The total number of minor ailments treated at the clinics during 1961 was 7,208; the corresponding figure in 1960 was 7,877.

Eye diseases, defective vision and squint.

Table IIIA gives an analysis of the treatment provided for visual defects. Cases of squint requiring orthoptic treatment are referred to those hospitals where facilities exist. Ophthalmic surgeons attend at 41 clinics throughout the County for the purpose of carrying out refractions and, where necessary, prescribing glasses.

Orthopaedic and postural defects.

Three clinics situated in the Boroughs of Guildford and Wimbledon and staffed by sessionally employed orthopaedic surgeons continued to be held. The following table shows the work carried out at these clinics during the year.

Name of Con	tre.		Number of sessions during year.	Number of children treated during 1961.	Number of attendances.	Number of new cases admitted.	Number of cases discharged.
Guildford, Stoke Road Guildford, Stoughton Wimbledon, Pelham Road		 	5 4 11	61 27 79	74 37 146	21 5 26	17 8 30
Total		 	20	167	257	52	55

In addition to these clinics, the Committee's physiotherapists undertook the remedial treatment of school children at clinics and schools during the year as follows:—

REMEDIAL TREATMENT CLINICS

Division,						Number of sessions during year.	Number of children treated during 1961.	Number of attendances.	Number of new cases admitted.	Number discharged.
North-Western						353	187	3,825	64	49
Central						455	361	2,401	264	214
North-Central				***		233	161	1,999	69	77
Southern						486	364	2,254	195	225
South-Eastern						703	598	6.724	337	252
Northern						236	328	2,475	235	235
South-Western						252	194	1,669	117	137
North-Eastern		***	***	***		131	96	873	48	38
Mid-Eastern	***	***		***		786	218	3,140	154	130
Total						3,635	2,507	25,360	1,483	1,357

Diseases and defects of ear, nose and throat.

The treatment of minor diseases of the ear, nose and throat were undertaken at minor ailment clinics and in addition the services of a part-time aural consultant continued to be available in the Borough of Guildford. Children requiring operative treatment were referred to the appropriate hospitals for their area. Details of such treatment are given in Table IIIB.

Ultra-Violet light treatment.

During 1961 263 children made 2,394 attendances for artificial sunlight treatment at school clinics.

Health visitors.

Arrangements were made during the year, as part of a general review of health visitors' duties, for state registered and enrolled nurses to be employed on a part-time basis to relieve health visitors of routine medical inspection duties in secondary schools and at minor ailment clinics operated independently of infant welfare centres. This was done to enable their time to be put to better use, e.g., health education in schools, and better contacts with head teachers to discuss health problems; there is no intention that the amount of time they devote to the school health service should be diminished. The following-up in the home of children found to have defects at medical and hygiene inspections remains an important part of the health visitor's duties as the following figures show:—

PART-TIME SCHOOL NURSES. SESSIONS WORKED IN 1961.

Division.				Preparation for Medical Inspection.	Medical Inspection.	General Medical Clinics.	
N.W.				127	254	33	
C.				2	71		
N.C.			- 411	81	162		
S.				-	33		
S.E.				22	54	24	
N. S.W.	***			_	32		
S.W.		***		-	103	44 58	
N.E.					215	304	
M.E.		110		16	59	198	
Tota	al			248	983	661	

A. HOME VISITS.

Division.		Infectious or contagious disease.	Verminous conditions or uncleanliness.	Treatment and Observation.	Educationally Sub-Normal.	Absence from school. Clothing Problem.	Ineffectual.	Miscellaneous.	Total Visit
N.W.		111	236	1,046	181	67	152	765	2,558
C		98	67	289	192	31	35	410	1,122
N.C.		26	54	494	104	3	110	200	991
8		506	52	408	107	16	85	223	1,397
S.E.		32	108	266	68	8	18	279	779
N.		14	13	132	59	2	41	66	327
S.W.		106	106	655	137	55	99	208	1,366
N.E.		27	75	697	205	31	43	81	1,159
M.E.		40	76	263	80	12	37	37	545
TOTAL		960	787	4,250	1,133	225	620	2,269	10,244

For the reasons mentioned above the following table shows a reduction of 2,500 in the number of fixed appointments taken :—

B. FIXED APPOINTMENTS.

Division.			Preparation Medical Inspection.		General Medical Clinic.	Hygiene.	Teaching Sessions.	Other.	Total.
N.W.			174	360	464	213	19	150	1,380
C.			132	418	122	102		131	905
N.C.		***	193	405	336	161		96	1,191
S.			75	337	294	131	20		857
S.E.		710	136	226	33	30	5	49	479
N.		-	73	215	140	45	1	7	481
s.w.			91	495	123	255	39	19	1,022
N.E.			60	516	206	104	22		908
M.E.			94	258	247	66	-	83	748
TOTAL			1,028	3,230	1,965	1,107	106	535	7,971

AUDIOLOGICAL SERVICE.

Three audiometricians serve the whole County using puretone audiometers. Children born in 1954 and 1955 were tested for hearing loss, together with others specially referred by teachers. Certain groups of handicapped pupils, e.g., children suffering from speech defects, cerebral palsy and educational retardation were also reviewed. Further details of the audiological service are given in the text of the County Medical Officer's report.

The following tables give details of the work of the audiometricians and of the audiological service during the year 1961.

AUDIOMETRY - 1961.

	GRAND TOTAL.	15,542	1,317	12.0	98 8 9 9	00 00 00	304	1,317	209	2 T 8
16	ALATOT	25	25	1-01-9	0441.	1 = 1	-	88	0	1"1
Mid-Bastery	Special Examinations (including retests and children attending speech clinics, special schools, etc.)	12	33	© = 01	9 99 91	m	1	52	7	1"1
Mrp	Routine Examinations.	67.	13	01	01 01	1 "	1	13	91	111
REN	JATOT	1000	83	111	1111	1 11	8	55	1	111
NORTH EASTERN	Special Examinations (including retests and children attending speech clinics, special schools, etc.)	25	16	111	1111	11 11	15	15	1	111
Non	Routine Examinations.	184	18	111	1111	11 11	18	18	1	111
TERN	TOTAL	2,605	122	22 22 21	5 ° 8 5	* 00 10	19	277	131	0.0
SOUTH WRSTERN	Special Examinations (including refeats and children attending special clinics, special schools, etc.)	87.4	135	101 01	8 - 0 8	1	-	135	11	00 00
Sour	Routine Examinations.	2,127	142	35 21	8 2 8 1 ,	0 00 01	10	142	8	1
и	TOTAL	902	94	13	2 01 01 1	- 01	. 00	99	90	G 61 65
NORTHEEN	Special Examinations (including refests and children attending speech clinics, special schools, etc.)	111	28	= 0	0 01 = 1	- 01		8		F 01 00
×	Routine Examinations.	796	90	01]	-11-	11 11	1	00	-	94
TERN	TOTAL	1,006	26	111	9 9 1	e9 61	28	81	0	*
SOUTH EASTERN	Special Examinations (including refests and children attending speech clinics, special schools, etc.)	8	Ħ	111	-2-1	11 -1	18	31	13	01
Sorr	Routine Examinations.	916	93	111	1-0-1	e -	28	8	*	111
N	TOTAL	01	164	10 36	22 = 1 2	5 ° ° °	-	164	01	011
SOUTHERN	Special Examinations (including refests and children attending speech clinics, special schools, etc.)	325	78	98 F- 69	∞ = ∞ °	9 - 9	-	8	1	111
90	Routine Examinations.	1,918	8	3 ° +	5 0 0	- 01 92	-	8	01	011
TEAL	TOTAL	1,437	137	2 2 7	3 × × + ;	N 00 -	1	137	16	01
NORTH CENTRAL	Special Examinations (including refests and children attending speech clinics, special Schools, etc.)	161	3	201	00 - 00 00 0	۰ ا	-	19	10	-11
Non	Routine Examinations.	1,276	12	6 6 7	L 7 0 - 1	9 01	-	55	9	-11
2	TOTAL	2,639	182	2 8 00 00	8230	1 64	9	182	75	500
CENTRAL	Special Examinations (including refeats and children attending speech clinics, special schools, etc.)	412	98	81 8	∞ <u>∓</u> ⊕ 01	11 00	00	95	茄	10
	Routine Examinations.	0.007	87	2 2 0	81 - 2 1	1 000	00	87	8	10 11
TERN	TOTAL	3,564	359	8 8 1-	3 5 5 7 7	N & 21 -	199	359	22	11
NORTH WESTERN	Special Examinations (Including retests and children attending speech clinics, special schools, etc.)	6207	64	0 1: 8	8211	04 04 2	121	213	0	*11
NORT	Routine Examinations.	3,037	146	5 00 4	1001	1 0 0	15	146	9	-11
		(1) No. of children tested		(3) Result of investigations by school medical officers:— (a) No appreciable hearing loss	(d) Catarrhal conditions, etc (e) No local cause found for deafness (f) Unhealthy tonsils (g) Mental refardation	(b) Miscellancous causes (c) Untraced or left district (f) Referred to general practitioners or still awaiting appointments	(f) Investigations remaining to be carried out		(4) Children referred to specialists for in- vertigation and treatment	mended in selected cases:— (a) Favourable position in class (b) Hearing aid provided (c) Lip reading instruction

AUDIOLOGICAL SERVICE.

The total No. of examinations carried out at the Audiology Glinic Glinic during reservanination).	+	27	57	45	40	89	255	30 08	43	62	ı	371
The No examine carrie at Audit Clinchar Clinchar caramine carrier carr	0-3	10	13	12	12	1-	11	81-0	39	1	1	135
9	11+	-	-	1	1	-	1	-11	1	- 1	1	00
fully of ye	7-11	1	1	01	1	00	18	111	01	1	1	1-
er not	2-2	10	00	œ	I	9	I	- 100	1	1	I	56
Number not fully assessed by end of year.	10	11	13	01	1	00	-	111	+	1	1	34
9886	0-10	00	00	1	1	1	00	111	27	1	45	67
e se de la companya d	+11	1.	#	-	1	1	15	1-1	1	- 1	1	10
to ha aring sring rainin	7-1111	1	-	1	-	1	1	111	1	1	1	0.5
found red he ing he tory t	5-7	1	01	-	1	1	T	11-	1	1	1	7
Number found to have impated hearing aid and auditory training.	10	-	-	1	1	1	1	01	-	1	1	9
Nu Broo an	0-2	01	1	1	1	1	1	-11	-	1	1	4
Ve 885.	=	1	1	-	1	00	1	01	-	1	1	13
Number found to have remediable hearing loss	+1111-1	1	-	*	0.9	29	1	111	1	1	1	12
found to bear	5-7	-	+	00	10	10	1	- 10	-	1	1	10
mber	10	-	1	01	1	62	1	21	01	1	1	=
Nu	0-2	1	1	1	1	1	1	111	1	1	1	1
4	+11	1	-	1	1	9	1		-	1	1	6
nd to	7-11	60	01	01	1	-	1		1	1	1	16
er fou	5-7	+	*	+	9	=	01	10 00	-	1	1	40
Number found to have normal hearing.	10-01	16	10	19	21	22	16	r + +	30	60	1	156
A	0-3	10	10	Ξ	00	9	6	4100	53	-	64	152
a ma	11+	1	1	1	1	1	1	111	1	1.	1	1
d over 880d b is yea	7-11	1	1	1	1	9	1	111	1		1	9
carries y asse revios	5-7 7-1	1	1	01	1	6.0	-	-	1	1	1	10
Number carried over as not fully assessed by end of previous year.	10	10	-	1	1	1	94	11-	1	1	1	10
N a s	0-0	1	-	1	-	1	60	111	01	-	25	34
z b ž	+	1	9	0.1	1	15	1	62 01 -4	-	1	1	30
or cas idiolog sourc	7-1111	63	*	9	60	1-	1		01	1	1	101
Number of new cases referred to Audiology Clinic from all sources.	5-7	10	13	=	=	19	01	9 8	01	1	1	85
umbes ferred inic fr	00	7	18	12	21	24	15	5.4	36	00	1	192
N 5 5	01	6	27	170	-	9	6	101010	34	1	1	105
Number of Children tested by H.V.'s	6-0	233	316	129	219	132	342	159 65 71	1048	100	89	2,082
	10	118	65	13	13	57	50	æ æ	47	66	1	310
Number of Children "at risk" referred for seroening during 1961.	0-0	434	302	211	219	155	365	88 87 87	613	145	88	2,882
Towns or T		:		1		-	-	rden	***			
Divisions.		North-Western	North-Central	Southern	South-Eastern	Northern	South-Western	North-Eastern. Merton and Morden Mitcham	Central	Mid-East. Carshalton Beddington and	Wallington	Total

HANDICAPPED PUPILS.

It is the duty of the County Council to make suitable provision for handicapped pupils in the County. The Handicapped Pupils and Special Schools Regulations, 1959, specify ten categories of Handicapped Pupils, namely:—

Blind. Epileptic.
Partially sighted. Maladjusted.
Deaf. Physically handicapped.

Partially deaf. Delicate.
Educationally subnormal. Speech defect.

Children who are handicapped in any of these ways require special educational treatment since they cannot be educated satisfactorily under the normal conditions of an ordinary school. The blind and the deaf will in general need to be educated in special schools and where this is not practicable the approval of the Minister is obtained to any alternative arrangements made. Many children in the other categories can receive appropriate education in the ordinary schools if suitable special provision is made.

The provision of special educational treatment for handicapped pupils in special schools and hostels was again increased during the year. At the end of 1961, 1,708 Surrey pupils were attending special schools compared with 1,666 at the end of 1960.

Schools and Hostels.

The following have been provided by the Education Committee :-

Handicap.	Name and Address of School/Host	el.	Accommodation.	Age Range
Educationally Subnormal	Beddington, Carew Manor Bramley, Gosden House		140 M. Day 80 G. 20 B. Boarding 20 M. Day	7-16 G. 5-16 B. 5-10
	Chessington, St. Philips Epsom, West Hill Mitcham, St. Christopher's Redhill, St. Nicholas Woking, Park		130 M. Day 50 M. Day 170 M. Day 100 B. Boarding 20 B. Day 120 M. Day	7-16 7-12 7-16 } 10-16 7-16
Delicate and physical	Guildford, Sunnydown Kingsten-upon-Thames, Bedelsford Oxted, Limpsfield Grange		40 B. Boarding 72 M. Day (including spastic unit) 38 M. Boarding	10-16 5-16 G. 5-16 B. 5-10
Deaf and partially deaf	Caterham, Portley House Ewell, Riverview County Primary Redhill, Nutfield Priory	***	40 M. Boarding 10 M. Day 80 M. Boarding	7-12 5-11 12-16
Maladjusted	Belmont, North Downs (day class) Camberley, Wishmore Cross Dorking, Starhurst Guildford, Thornchace, Merrow (Hoste Guildford, Grove Class, Merrow (day cl Wimbledon, Hollymount (day class)	el)	15 M. 30 B. 30 B. 20 M. 15 M. 30 M.	7-11 10-16 10-16 G. 5-12 B. 5-10 7-11 7-11

Hospital schools.

The Committee provide education for handicapped pupils on the registers of the following Hospital Special Schools:—

Carshalton, Queen Mary's Hospital.

Pyrford, The Rowley Bristow Orthopaedic Hospital School.

Epsom, St. Ebbas Hospital School, Hook Road. Tadworth, Tadworth Court Hospital School.

In addition there were 48 children who at the end of the year were having tuition in the wards of certain general hospitals in the County.

Home tuition.

There are some handicapped children who, during the waiting period for admission to residential schools, or because of the severity of their disabilities, have to be provided with education in their own homes and at the end of the year there were 68 children being educated in this way.

Wishmore Cross School, Camberley.

This boarding school for maladjusted boys of secondary age which opened in September, 1961, caters for those of average or slightly below average intelligence. The present accommodation provides for 30 boys, and it is expected that the school will be full by the end of the Spring Term, 1962. It is intended that the accommodation shall ultimately be extended to 45 boys.

Starhurst School, Dorking.

Starhurst School (formerly Starhurst Hostel for Maladjusted Boys) was recognised as a boarding school for 30 maladjusted boys by the Ministry of Education as from September, 1961. It is intended ultimately to increase the accommodation to 45.

Leatherhead School for Educationally Sub-Normal Children.

Work has commenced on the building of this new school, which is to replace the temporary school at West Hill, Epsom. It is hoped that this school will be ready for occupation at the beginning of 1963.

Partially deaf units for day pupils.

A unit for 10 partially deaf pupils of primary school age was opened in September, 1961 at Riverview County Primary School, Ewell. A further class at the same school will be opened in September, 1962.

It is proposed to open a similar class at Woodlands County Primary School, Woking, in the autumn of 1962.

The Grove, Merrow.

A day class for 15 maladjusted boys and girls of primary school age was opened in the summer term of 1961 at the Grove, Merrow (in the grounds of Thornchace Hostel).

The following table shows the number of Surrey children ascertained as handicapped pupils and the provision made for their education :—

												Dis	posal.									
	7000			Rec	omn	ended	Spec	ial Sc	chool o	or Ho	stel.								Under Review.			
Category.	Ha	tal ndi-	In	Spec	ial Se	chool o	or Hos	stel.					Reco men spec	ded			Tuit			194	Ath	ome
Category.	capped Pupils.		Pro- vided by Surrey.		Ot	Other. Total.		Parents refuse consent.		On waiting list.		education in Ordinary School.		Home Tuition.		Hospital or Special Units.		Ordin Scho	ary	or in hospital or in Private School.		
Blind	B 25	G 20	В	G	B 21	G 15	B 21	G 15	В	G	В	G	В	G	В	G 3	В	G	В	G	В	G
Partially sighted	40	29			24	17	24	17	1		2 2	2	10	5			_		2		3	1
Deaf	59	50	15	17	35		50	39	-	-	3	2	4	7		1	_	-	9	-	-	
Partially deaf Educationally	106	97	6	4	16	6	22	10	-	-	-	2	65	72	-	-	-	-	16	8	3	1
sub-normal	1,151	652	527	325	48	25	575	350	34	26	125	53	296	158	4	4	-		102	52	15	
Epileptie		30			17	9	17		-	1			5	3	-	-	-	_	13	15		1
Maladjusted Physically	266	92	104	14	94	54	198	68	3	2	34	9	5	3	8	3	-	-	13	6	5	1
handicapped	328				82				4	-	12	7	52		23	13	22		65		25	
Delicate	204	105	41	19	64	21	105	40	11	6	13	5	20	16	2	-6	3	1	41	26	9	1
Speech defect	3	4	-		2	4	2	4		-	-	-	-		-	-	-		1	-	-	-
Totals	2,221	1,294	736	409	403	227	1139	636	53	35	191	80	457	293	38	30	25	23	255	151	63	46

The Mental Health Act, 1959, by amending the Education Act, 1944, introduced certain changes in the law relating to children who suffer from a disability of mind which makes them unsuitable for education at school. Section II of the Mental Health Act substitutes new sections, 57, 57A and 57B for Section 57 of the Education Act, 1944 as amended by Section 8 of the Education (Miscellaneous Provisions) Act, 1948. The new sections are concerned with children who through a disability of mind are "unsuitable for education at school." This phrase replaces the words "incapable of receiving education at school" and is intended to assist in the implementation of the recommendation of the Royal Commission that children should not be declared to be "ineducable," and that those severely sub-normal children who are unable to profit by education in ordinary or special schools should be recommended for training in training centres provided by the local health authorities or in hospital.

There is usually no advantage in making a decision under Section 57 before a child reaches the age of five. The local health authority have the power to provide the help needed at any time for any children whose disability of mind is such that they are obviously unsuitable for education at school. These young children will normally be known to the local health authority who in most cases are likely to be able to obtain the parent's agreement to the arrangements proposed for the care or training of the child. In such cases the Minister advises that it is unnecessary to record a decision under Section 57.

The co-operation of the parents has been obtained in the majority of the cases and as a result the number of examinations arranged under the provisions of Section 57 has been considerably reduced. 19 children were reported to the Mental Health Committee in 1961 as unsuitable for education at school. The comparable figure for 1960 was 44. The Education Act no longer provides for the issue of statutory reports in regard to children considered to be in need of supervision after leaving school. The Minister advises, however, that local education authorities can pass to local health authorities information on school leavers who they think will require care or guidance. 49 pupils were referred to the Mental Health Committee during the year as likely to benefit from community care after leaving school.

Convalescent treatment.

There were 314 children admitted to convalescent homes during the year, a slight increase on the previous year when the number was 262. The normal period of stay varies from two to four weeks.

SPECIAL FORMS OF TREATMENT.

Child Guidance Service.

In the latter part of 1959, as a consequence of consideration of the report on maladjusted children (the Underwood report), the Education Committee decided to develop the school psychological service.

The appointment of an additional number of educational psychologists was authorised with a view to enabling not only those newly appointed, but also the educational psychologists already in the service, to spend about half their time in schools giving advice on problems involving educational guidance to children who would not normally be considered to need to attend at a child guidance clinic. The remainder of their time is spent in the clinics dealing with children who require the help of the full clinic team.

The following table shows the total authorised establishment for all staff in the child guidance and school psychological service. The recruitment of psychiatric social workers continued to prove most difficult because of the national shortage.

	linie.			Profession	al and clerical staff	employed expressed	as a proportion of full	l-time.
	-			Psychiatrists.	Educational Psychologists.	Psychiatric Social Workers.	Psychotherapists.	Cierical.
Farnham		***		0.4	1.0	0.5	_	1.0
Godalming		***		0.4	1.0	0.5	_	1.0
Guildford	***	***	***	1.0	2.2	2.0	0.4	2.0
Chipstead				0.6	1.0	1.0	-	1.0
Reigate	***	***		0.6	1.0	1.0	-	1.0
Richmond				0.6	0.8	1.5	0.2	1.0
Malden	***			0.6	1.2	1.5	0.4	1.0
Sutton and L	eather	head		1.1	2.4	3.0	1.6	2.0
Wimbledon				0.6	1.0	1.0	0.5	1.0
Mitcham	***			0.6	1.0	1.0	0.1	1.0
Woking		***		0.6	2.0	2.0	-	2.0
Total equival	ent fu	Il-time		7.1	14.6	15.0	3.2	14.0

The following table gives details of	number of cases referred to av	d soon at alinias during the ween
The following table gives details of	number of cases referred to an	d seen at clinics during the year.

Clinic.	Chipstead	Farnham	Godalming	Gulldford	Malden	Mitcham	Reigate	Richmond	Sutton	Wimbledon	Woking	Total
No. of cases referred during year	90	61	49	157	229	56	61	85	207	122	129	1,246
No. of new cases seen	68	56	44	135	176	49	56	61	126	114	98	983
No. of cases discharged Analysis :	50	66	76	207	164	48	74	70	67	121	36	979
(a) Treatment completed	27	21	29	110	26	26	69	37	37	36	32	450
(b) No treatment required	12	20	14	70	101	10	1	10	26	46	2	312
(c) non co-operation of parents	3	8	6	9	16	8	1	15	2	5	1	74
(d) Other arrangements made	8	17	27	18	21	4	3	8	2	34	1	143
No. of cases under treatment at end of year	31	15	6	47	20	18	67	30	97	48	30	409
No. of cases under supervision at end of year	13	31	20	107	158	13	80	66	93	144	75	800
No. of cases withdrawn from waiting list during year	32	19	20	28	62	12	10	22	97	14	25	341
No. of cases remaining on waiting list at end of year	20	7	5	27	19	12	19	20	58	10	16	213
No. of interviews by psychiatrists Analysis :	733	377	352	1,378	752	680	378	775	1,163	749	1,111	8,448
(a) With children for examination	64	82	77	166	226	49	66	149	186	129	112	1,306
(b) With children for treatment	575	163	154	705	260	568	176	372	715	516	828	5,032
(c) With parents	82	106	86	381	232	33	121	136	235	87	124	1,623
(d) With others	12	26	35	126	34	30	15	118	27	17	47	487
No. of sessions held :												-
(a) Danahlatulata	258	104	85	386	272	289	192	265	447	300	336	2,934
(b) Educational psychologists	344	158	108	676	367	388	366	316	1,053	515	467	4,758
(a) Developthonorists	43			53	222	50		94		241	- CO. C.	958
(d) Psychiatric social workers	249	88	70	658	572	162	298	573	255	502	265	4,622
(-) Johnston Count Houseld 111	240	00	10	008	312	162	298	313	1,185	302	203	4,022

Speech defects.

There were 52 Speech Clinics in operation at the end of the year at which a total of 135 treatment sessions were held each week. Regular sessions were held also at Carew Manor, Gosden House, The Park, St. Nicholas', St. Christopher's, St. Philip's and West Hill Special Schools, and at the Spastic Unit attached to Bedelsford Day Special School. A new clinic was opened at Egham Hythe and additional sessions were provided at Camberley, Mortlake, Raynes Park, The Park School, Woking and West Hill School, Epsom. There were 2,091 individual children treated during the year compared with 2,034 in 1960, these were mainly for stammer, lisp and under-developed speech. Of these 372 were discharged as cured, 169 discharged as greatly improved, 135 discharged as showing some improvement and 72 as showing little or no improvement. A table showing the work of the Speech Therapists in 1961 is given at the end of this report.

The use of tape recorders in speech therapy proves a valuable aid to treatment and at the beginning of the year there were eleven machines distributed throughout the County. The need for additional machines had become very apparent and at the same time it was appreciated that to provide a recorder for each clinic would entail considerable expense. A commercial machine with good quality reproduction and weighing only 18 lbs. was ultimately selected as suitable and 9 of these machines have been purchased and issued to individual therapists who are well able to take them by hand to the various clinics they attend.

INFECTIOUS DISEASES.

The following tables give the number of notifications of cases by head teachers and the total exclusions on account of the principal infectious diseases during 1961:—

Di	iscase.		Suffering.	Excluded on suspicion.	Infection at home,	Total exclusions
Small Pox			 -	_		_
Diphtheria				2		2
Scarlet fever			 310	6	11	327
Enteric fever			 		ana S	
Measles		***	 8,714	65	96	8,875
Whooping cou	gh		 384	13	15	412
German measl			 2,475	14	50	2,539
Chicken-pox			 3,108	4	15	3,127
Mumps			 3,146	8	34	3,188
Jaundice		***	 58	-		58
Other	***	***	 746	12	11	769
Tot	tals		 18,941	124	232	19,297

CONTAGIOUS DISEASES.

	Dise	ase.		Suffering.	Excluded on suspicion.	Total exclusions
Ringworm				 3	_	3
Impetigo				 20		20
Scabies	***	***	***	 4		4
Other	***	100	***	 17	-	17
	Tota	ls		 44	_	44

Tuberculosis in Schools.

During the year 35 schoolchildren, 2 teachers, 1 school caretaker and 1 school canteen assistant were notified as suffering from pulmonary tuberculosis and it was decided that special investigations should be carried out at 14 of the schools involved (11 in County or Voluntary Schools and 3 in Independent Schools). By the end of 1961, 9 of the investigations were completed. The combined results are summarised below, together with the findings of 4 surveys respecting 1960 notifications which were not ready by the end of that year, and one survey respecting a 1958 notification which was completed in 1961.

In 13 of the 14 investigations, 2,924 children were Mantoux tested of whom 378, or 7.7 per cent were found to be Mantoux positive, and these positive reactors were then X-rayed. X-raying only was felt to be sufficient in the remaining incident. The results of these X-ray examinations were satisfactory except in one incident where it was found that one of the positive reactors to the Mantoux test was suffering from tuberculosis.

The figures quoted above do not include those relating to one incident which commenced in February 1961 and into which the investigations were not completed by the end of the year. This outbreak, involving the infection of 16 pupils by a teacher who developed pulmonary tuberculosis, was the sole cause of the increase in the number of schoolchildren notified in 1961 (35) compared with the previous year (24). In view of its importance an account of this incident is given below.

A very extensive investigation, involving three clinical surveys at the school, was made into this disturbing outbreak which first came to the notice of the Divisional Medical Officer in February, 1961, when one boy was diagnosed and notified as suffering from pulmonary tuberculosis. The teacher was next diagnosed (with a positive sputum) and, two months after his last attendance on duty, Mantoux testing was carried out at the school. Subsequently the mobile X-ray unit of the Mass Radiography Service visited the school to X-ray positive reactors and the resulting preliminary report indicated that 5 children had apparently definite primary lesions. 12 children were considered to be doubtful and were the subject of further investigation. No cases were found among school leavers.

As a result of the first epidemiological investigation, of 176 pupils on the school roll, 130 were Mantoux tested, 30 had chest X-rays (their parents refusing consent to Mantoux testing), 13 were already under the supervision of Chest Clinics and 3, including the "index" (first) case, having already been diagnosed as suffering from primary tuberculosis, were in hospital.

Of the 130 pupils Mantoux tested, 78 were negative and 52 positive. The positive reactors, together with the 30 pupils whose parents agreed to X-ray examination only were X-rayed and 19 were found to require further investigation following which 9 pupils were admitted to hospital and the remainder placed under observation. All members of the teaching, clerical, canteen, caretaker and cleaning staff were X-rayed with satisfactory results. The Divisional Medical Officer reported that one important feature of the survey was that every single pupil and member of the school staff was investigated.

I take this opportunity of emphasising as strongly as possible that, despite all the advances of medicine and surgery, pulmonary tuberculosis remains a potential menace to the community. It is therefore particularly important that all those coming into contact with children should take every step to prevent outbreaks of this sort, one of the best safeguards being, of course, an annual chest X-ray examination which may be had free of charge under the Mass Radiography Service provided by the Regional Hospital Board.

IMMUNISATION AND VACCINATION.

The responsibility for immunisation and vaccination is placed on the local health authority by Section 26 of the National Health Service Act, 1946, and details of the work including information on the poliomyelitis vaccination scheme carried out in 1961 are described in the County Medical Officer's annual report.

PROMOTION OF HEALTH.

I am indebted to the Chief Education Officer for the notes under this heading.

Report on Physical Education.

Primary Schools.

The work in physical education in the primary schools is, on the whole, very satisfactory. Facilities and equipment for better work are constantly being provided and an acceleration of these improvements can now be expected because of the substantial grant made by the Education Committee for this purpose. Many schools have increased their stock of modern apparatus and have had, or are about to have, improved storage facilities.

Attendance at courses for teachers of primary age children has been very good and there is great enthusiasm amongst these teachers to improve both the standard and range of work and their own personal qualifications.

Courses in: (a) Music and movement.

- (b) Use of agility apparatus.
- (c) Games, skills and techniques.
- (d) Swimming.
- (e) Posture and the avoidance of strains.

have been successfully held at various centres in the county.

Secondary Schools.

The acute shortage of specialist teachers of physical education which reached its peak in 1960-61 has been overcome to a far greater extent than was expected either by full-time or part-time teachers, and this has resulted in more settled and more progressive work in secondary schools. The grant made by the Education Committee for the improvement of facilities for physical education has made possible the provision of vastly improved practice facilities for tennis, cricket, basketball, athletics, etc. These improvements have been greatly appreciated by both staff and pupils and will no doubt lead to high standards and achievements.

The response from secondary teachers for refresher courses in many aspects of physical education has been disappointing and several proposed courses have had to be cancelled for this reason. However, the interest in outdoor activities has been maintained and many more schools are now taking part in such activities as canoeing, sailing, fell walking, rock climbing and the Duke of Edinburgh's Award Scheme.

It is felt for the first time for many years that there is a slight overall improvement in secondary work due to (a) improvements in staffing; (b) improvements in facilities; and (c) a renewed interest in gymnastic work.

Swimming.

The enthusiasm for swimming shown over the past few years has been well maintained. The number of learners' pools has grown to 19 and several more are planned. In addition, three secondary schools are hoping to construct recreational pools. A most successful conference on the construction and maintenance of such pools was held during the year in Morden and a teaching course at Redhill was well attended and amply justified by results.

Open Air Education.

Summer Camp.

The Henley Fort Camp was in use during the period 6th May to 9th September and during this period no serious illness occurred. The following statistics are given for 1961 together with those for the preceding year:—

					1960	1961
					(39th season)	(40th season)
Number of children				***	541	466
Number of teachers					40	44
Number of schools			***		9	8
Average cost of food	per	head per	week		£1/2/101d.	£1/3/111d.
Number of weeks			***		18	18

Sheephatch School.

Sheephatch School has hitherto offered short-term residential general education of periods of one term and upwards for Surrey children under conditions beneficial to their physical health and general welfare and applications will continue to be considered on that basis. A new laboratory for rural science will be provided by September, and specialist staff have been appointed to teach that subject, as well as for physical education for both boys and girls with, naturally, a bias towards games and other outdoor activities. The school has this year, in the Spring and Summer terms, given a number of children an introduction to some pursuits of the countryside of the type included in the Duke of Edinburgh's Award.

Sheephatch is, at the same time, fully staffed to provide general education, so that in the new conditions, arrangements can be made for most children following general courses in day schools to continue those courses without interruption for up to a complete educational year.

There is thus at Sheephatch the opportunity to enjoy the community life of a boarding school, to continue sound general education, and to supplement this with specific teaching of rural science and with enjoyment of liberal outdoor pursuits.

Boys and girls from $12\frac{1}{2}$ years are considered for admission; preference is given to those about to enter the third year of their secondary course. Pupils known to present behaviour problems are not accepted, and it should be appreciated that although Sheephatch School can clearly help children for whom a period away from home is very desirable because of some temporary circumstance there, this is not its sole object, and applicants should not be restricted to children in that category.

Provision of Meals and Milk.

The following table gives statistics as to the number of day pupils receiving mid-day meals at school on a day in September, 1961.

No. in	Total No. of	No. supplied				
Attendance.	mid-day meals supplied.	Free of cost.	Half-cost.			
174,763	118,644	3,214	349			

The total number of pupils, both day and boarding, who were receiving milk free of cost was 141,106 in maintained schools and 39,455 in non-maintained schools.

FURTHER EDUCATION AND TRAINING OF DISABLED PERSONS.

At 31st December, 1961, the Education Committee was responsible for the maintenance and training at residential institutions of three handicapped persons over special school leaving age. The responsibility of the Committee in this respect is limited to those persons who require education as part of their training. Where the training is purely vocational responsibility is accepted by the Ministry of Labour and National Service.

EMPLOYMENT OF CHILDREN.

An amendment to the bye-laws regulating the employment of children, to provide for the medical examination of children in part-time employment annually instead of twice a year was approved by the Secretary of State and came into operation as from 1st May, 1961.

Of the 4,576 children who were medically examined during the year as to their fitness to take part-time employment only seven were found to be unfit. The examinations are undertaken by the school medical officers at the clinic nearest to the homes of the applicants and in all 5,386 examinations and re-examinations were carried out for this purpose.

There were 51 licences applied for during the year for pupils to take part in entertainments. All these children were examined by school medical officers and with one exception were found to be fit.

REPORT OF PRINCIPAL SCHOOL DENTAL OFFICER FOR THE YEAR 1961.

The total dental staff at the 31st December consisted of 32 full-time, 3 part-time salaried officers and 31 sessionally-employed officers equivalent to an additional 10.8 whole-time officers. Approximately 10 per cent of their time is devoted to maternity and child welfare work. This compares with the position at the end of 1960 when there were 30 full-time, 3 part-time salaried officers and 31 sessionally-employed officers, equivalent to an additional 12.8 whole-time officers. These figures give a comparison on specific dates but there were fluctuations in the staffing strength during the course of the year. Changes in staff were mostly confined to sessionally-employed officers but the loss of some members of the staff in the middle of the year was made good at a later date and there was a marked increase in applications for part-time employment at the end of the year. Recruitment of permanent staff remains a major difficulty and the high average age of full-time officers causes concern.

Mr. C. F. K. Evans resigned in March to take up an appointment as Principal School Dental Officer, City of Lincoln. I wish him every success in his new post.

Accommodation and Equipment.

A new clinic with a self-contained dental suite, replacing the former clinic at Ewell Court, was opened in June. The new clinic was equipped additionally with X-ray apparatus and a high-speed air-turbine drill.

An additional surgery was brought into use at New Malden Clinic which permitted some re-allocation of schools in the New Malden and Kingston areas. Adaptations were completed at Claremont Avenue Clinic, Woking, and the dental service was transferred from the Locke-King Clinic to Stretton Lodge, Weybridge.

New equipment, including high-speed air-turbine handpieces and dental units, has been installed in several of the older clinics throughout the County.

Orthodontic Service.

Orthodontic treatment was carried out by two full-time officers and five sessionally-employed officers specially engaged for this purpose. Additionally, most dental officers undertake a limited amount of orthodontic treatment, the simpler cases usually on their own initiative and the more complex cases frequently after consultation with one of the orthodontists. Most of the cases were treated by removable appliances (2,396) and in addition 59 fixed appliances were fitted. The duration of a course of orthodontic treatment for a complex case may last two years or more, but there is generally excellent co-operation from both patients and parents and in the vast majority of cases a successful functional and aesthetic result is obtained. The use of X-rays plays an important part in the planning of treatment and facilities for the taking and processing of X-ray films were available in eighteen clinics throughout the County.

County Dental Laboratory.

The staff of the laboratory consisted of a Chief Technician assisted by four technicians and two apprentices. A vacancy for a technician remained unfilled for the greater part of the year. The majority of the prosthetic work from the Council's clinics was undertaken at the laboratory but it was still necessary to send a limited amount of work to outside laboratories.

The following table shows the record of the work of the laboratory in connection with the School Dental Service. The figures in brackets give the total work including that for the Priority Service.

Orthodontic Appliances.	Dentures.	Repairs.	Crowns and Inlays.	Reference Models.	Other Mechanical Operations.	Total No. of Operations.
2,218	197	212	64	2,526	168	5,385
(2,218)	(471)	(253)	(69)	(2,526)	(665)	(6,202)

Dental Hygienists

For some years a dental hygienist has been employed in the South-Eastern Division and another hygienist was appointed in October to work in the North-Eastern Division. The duties of hygienists are scaling and polishing of the teeth and dental health education to patients as individuals or in groups. The hygienists carried out 1,747 scalings and polishing and 84 hours were spent in instruction in oral hygiene.

Dental Inspection and Treatment.

An analysis of the work carried out during the year shows that 151,297 children were inspected at routine school inspections and 10,751 as specials at the clinics, making a total of 162,048. Most of the schools were visited during the course of the year and in several instances there were two routine inspections during this period. It was noticeable that many children were receiving treatment from practitioners in the General Dental Service. Fillings in permanent teeth numbered 66,782 and in temporary teeth 19,664. The number of permanent teeth extracted was 6,724 and temporary teeth 18,447. Statistical information is given in Table IV.

Dental Health Education.

Reference has been made in previous reports to the high incidence of dental decay. While no single measure can be expected to prevent decay, it is probable that a large measure of control could be secured by the following means:—

- (i) To assist the development and calcification of the teeth, the diet should be well balanced with adequate amounts of proteins, vitamins, calcium, phosphorus and trace elements, particularly fluorine. These are to be found in milk, cheese, raw fruit, fresh vegetables and are particularly necessary for the expectant and nursing mother and the growing child.
- (ii) A diet requiring active mastication and finishing each meal with hard fibrous foods such as apples, nuts and celery which have a natural cleansing action on the teeth.
 - (iii) The avoidance of between-meal snacks of sweets, biscuits, buns and sugared drinks.
- (iv) The correct use of a toothbrush immediately following meals and particularly last thing at night.
- (v) The vigorous rinsing of the mouth with plain water following tooth brushing. Thorough rinsing may be carried out alone when circumstances do not permit the use of a toothbrush and the water can be swallowed.
 - (vi) Dental inspection and early treatment if required.

Although much time in the past has been devoted to dental health education an offer from the Oral Hygiene Service to assist in promoting a dental health campaign was welcomed. It was considered that a health project in a particular area would prove worthwhile and that the knowledge gained would be useful in promoting similar campaigns elsewhere in the County.

The South-Western Division was chosen for the campaign and the Ancillary Services Committee of the Divisional Executive and the appropriate Committees of the County Council approved a draft plan prepared by Dr. Finn in collaboration with the Principal Dental Officer and representatives of the Oral Hygiene Service for a Dental Health Education Campaign in Guildford to last for a period of six months from October 1961 to March 1962.

Considerable preparation for the project was carried out by a Committee composed of the Divisional Medical Officer and his senior administrative assistant, Divisional Educational Officer, Assistant Inspector of Schools, two Head Teachers, Chairman of the Guildford Section of the British Dental Association, Health Education Officer and representatives of the Oral Hygiene Service.

The central theme of the project was "Good Teeth for Guildford" and the objectives to increase the knowledge and practice of oral hygiene among school children and adults in the area. The results were to be assessed by comparing the standard of oral hygiene among a sample of school children immediately before the campaign and again after a period of six months. During the course of routine dental inspections in schools, 1,911 children in various age groups were examined.

Full co-operation of the Education Department and the Teaching Staff of the schools was obtained for the dental examinations and for the distribution of large quantities of posters, leaflets, letters to parents and other dental health literature. Facilities were afforded to Miss Land of the Oral Hygiene Service to visit 38 schools where she gave illustrated talks with films in sound and colour suitable for the various age groups, comprising in all over 9,000 children. Apples donated by the Fresh Fruit and Vegetable Council were distributed to each child.

A briefing meeting was held at the Guildhall in September and a public meeting was held in the Girls' Grammar School on 12th October at which the Mayor of Guildford presided. The speakers included Mr. W. Stewart Ross, Chairman of the Dental Health Committee of the British Dental Association, Dr. W. G. Senior, Chief Dental Officer, Ministry of Health, and Dr. A. B. R. Finn.

Although perhaps the greater effort has been directed to children and undertaken in the schools, lectures and film shows were given by Mr. F. G. Davies to several Parent-Teacher Associations and talks were arranged for expectant and nursing mothers attending mothercraft classes. As the foundations of the teeth are laid down before birth, the health of the mother during pregnancy is of vital importance.

Through the co-operation of the editors, photographs, articles, children's painting competitions and crossword puzzles with dental health themes were published in the local newspapers. The manager of the local cinema arranged to show short dental health films and he has kindly agreed to stage an exhibition of children's paintings and models at a future date. Wider publicity was given to the campaign by radio and the national Press.

A letter was sent to parents before the Christmas holidays requesting their continued co-operation and supervision of their children's oral hygiene. Parents were informed of the competitions in the local papers and of the showing of dental health films at the cinema. Class and individual projects are being arranged in the schools during the Spring Term, 1962, and prizes will be presented for the best efforts.

Shortly after the end of the campaign in March, 1962, a second assessment of the standards of oral hygiene will be made by the School Dental Officers and a report drawn up on the difference and possible improvement between the two inspections.

It is intended to continue a programme of low intensity dental health education for an indefinite period to maintain and promote interest.

In conclusion I would like to acknowledge the help given and interest shown by the Oral Hygiene Service, the British Dental Association, the Ministries of Health and Education, the Fresh Fruit and Vegetable Council, the local Press, the Divisional Education Executive and members of the Teaching and Medical and Dental Staff.

O. H. MINTON,

Principal School Dental Officer.

TABLE I.

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

A .- Periodic Medical Inspections.

		Physical Condition of Pupils Inspected.							
Age Groups Inspected (by years of birth).	No. of Pupils Inspected.	SATISE	ACTORY.	Unsatisfactory.					
(1)	(2)	No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2.				
1957 and later	1,450	1,445	99.7	5	0.3				
1956	12,317	12,236	99.3	81	0.7				
1955	4,131	4,093	99.1	38	0.9				
1954	896	884	98.7	12	1.3				
1953	13,931	13,861	99.5	70	0.5				
1952	996	976	98.0	20	2.0				
1951	555	553	99.6	2	0.4				
1950	8,094	8,058	99.6	36	0.4				
1949	6,459	6.429	99.5	2 36 30	0.5				
1948	2,221	2,215	99.7	6	0.3				
- 1947	5,388	5,377	99.8	11	0.2				
1946 and earlier	16,483	16,413	99.6	70	0.4				
TOTAL	72,921	72,540	99.5	381	0.5				

B.—Pupils Found to Require Treatment at Periodic Medical Inspections (excluding dental diseases and infestation with vermin).

Age Gr	coups Ins	spected irth).		For defective vision (excluding squint).	For any of the other conditions recorded in Table II.	Total individual pupils
1957 and lat	er			13	112	134
1956	***	444		263	1,101	1,293
1955			***	135	404	511
1954				53	103	150
1953				647	1,120	1,677
1952				54	112	154
1951			***	42	90	125
1950				442	630	975
1949				446	559	942
1948				159	184	319
1947				282	423	669
1946 and ear				869	1,181	1,968
TOTAL				3,405	6,039	8,917

C .- OTHER INSPECTIONS.

Number of Special Inspection	ons	***	***	***	12,657
Number of re-inspections	***	***	***		13,772
Total			***	***	26,429

D.—Infestation with Vermin.

(a)	Total number of individual examinations of	pupils	in scl	hools	by scho	ool nu	rses or	
	other authorised persons	***	***		***		111	165,355
(b)	Total number of individual pupils found to b	e infest	ed			***	***	595
(c)	Number of individual pupils in respect of	whom	clean	sing	notices	were	issued	
	(Section 54(2), Education Act, 1944)		***	***	***	***	111	-
(d)	Number of individual pupils in respect of	whom	clear	nsing	orders	were	issued	
	(Section 54(3), Education Act, 1944)	***			444	211	***	-

TABLE II

DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR.

A.—PERIODIC INSPECTIONS.

							PERIODIC 1	INSPECTIONS	5.			
Defect or Disease.				Entrants.			Leavers. Other			ers. Total.		
				(T)	(0)	(T)	(0)	(T)	(0)	(T)	(0)	
Skin Eves—				145	369	460	544	527	861	1,132	1,774	
(a) Vision				368	1.024	1,058	2.101	2,001	3,016	3.427	6,141	
(b) Squint				205	261	80	84	253	382	538	727	
(c) Other				42	98	38	137	103	285	183	520	
Ears—	111									1	1	
(a) Hearing				67	386	36	146	184	601	287	1.133	
211 101111 28 25				58	414	19	110	43	376	120	900	
(c) Other	***	***		33	122	80	106	151	217	264	445	
Nose and Throat			10000	277	1,992	62	361	269	1.962	608	4,316	
Speech	***		***	147	416	21	57	239	358	407	831	
Lymphatic Glands	***	***	***	37	709	8	78	30	630	75	1,417	
	***	***		19	249	10	236	30	409	59	894	
	***	***	***	99	583	30	250	140	776	269	1,609	
Lungs Developmental—	***	***	***	00	000	00	200	110	1	200	2,000	
(a) Hernia				22	91	10	25	18	96	50	219	
(b) Other	***	***	***	22	456	27	156	99	840	148	1,452	
Orthopaedic—	***	***	20.6		400	55	100	00	0.0	100	4,40	
(a) Posture				40	162	153	441	312	740	505	1,343	
W 1 WH	***	***	***	249	682	175	321	440	878	864	1,881	
(c) Other	***	***	***	103	616	124	695	247	1.177	474	2,488	
Nervous System-	***	***	***	100	010	100	000		1,111		2,400	
(a) Epilepsy				15	25	19	23	44	68	78	116	
(b) Other	***	***	***	6	67	11	53	20	162	37	283	
Pyschological—	***	4.00	***	0	01	11	00	20	102	31	202	
	2000			8	123	53	66	363	435	424	624	
(a) Development		***	***	16	394	13	171	69	736	98	1,301	
(b) Stability	***	***	***			13	57	24	228		380	
Abdomen	***	***	111	11	95					48		
Other	***	***	444	77	257	75	378	184	691	336	1,326	
	Total	***		2,066	9,591	2,575	6,596	5,790	15,924	10,431	32,111	

(T)-Treatment.

(O) = Observation.

B.—Special Inspections.

		Def	et or I	Moneye			- 1	Special I	nspections
		2761	N. 04 A	A DECEMBER 1				requiring treatment.	requiring observation
Skin Eyes—								1,437	114
	Vision							1,337	989
(b)	Squint				***	***		58	31
(c)	Other	***	***	111	***	***		219	53
Ears-									
(a)	Hearing					***		269	445
	Otitis M				***			53	23
(c)	Other	***	***	***		***	***	108	43
Nose a	nd Thros	t						671	336
Speech				***	***	***	***	333	156
	atic Glar		***	***	***	***	***	15	37
Heart	atio Orine		***	***	***	***	***	10	86
Lungs		***		***	***	***	***	121	198
	omental-	***	211		1.00	1111	****	1-1	100
	Hernia							13	6
	Other	***	111	***	***	***	***	50	88
	aedie-	***	***	***		***		30	00
	Posture						- 200	55	119
	Feet	***	111	***	***	111	***	111	176
	Other		***	***	***	***	***	193	183
	s System	***	***	***	****	***	***	195	155
	Epilepsy							9	15
	Other		***	***	***	***	***	57	37
	logical—	***	***	***	***	***	***	01	01
	Develop	mont						234	43
	Stability		3.13	***	***		***	246	128
Abdom	Stability		***	***	***	***	***	240	
Other		***	***	***	***	***	***		52
Other.	***	***	***	***		***	***	1,240	609
-		_		7	Total			6,867	3,967

TABLE III.

TREATMENT OF PUPILS ATTENDING MAINTAINED AND ASSISTED PRIMARY AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

A.—EYE DISEASES, DEFECTIVE VISION AND SQUINT.

	Number of cases known to have been dealt with.
External and other, excluding errors of refraction and squint Errors of refraction (including squint)	479 11,824
Total	12,303
Number of pupils for whom spectacles were prescribed	6,533

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

				Number of cases known to have been dealt with
Received operative treatmer (a) for diseases of the e (b) for adenoids and ch (c) for other nose and t Received other forms of trea	ronic t	condition		9 645 33 1,188
Total		***	 	1,875
Total number of pupils in s have been provided with i (a) in 1961 (b) in previous years	hearing		n to	53 180

C .- ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated.
(a) Pupils treated at clinics or out-patients departments	2,409 530
Total	2,939

D.—DISEASES OF THE SKIN.

							Number of cases known to have been treated.
Ringworm-							
(a) Scal		***	***	***	***	***	5
(b) Bod	y	***					17
Scabies				***			14
Impetigo					***		75
Other skin d			122	****		***	2,350
		Total	***				2,461

E.—CHILD GUIDANCE TREATMENT.

		Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics	 	918

F .- SPEECH THERAPY.

	Number of cases known to have been treated.
Pupils treated by speech therapists	2,091

G .- OTHER TREATMENT GIVEN.

	•					Number of cases known to have been dealt with
(a) Pupils with minor	3,080					
(b) Pupils who recei under School He	alth S	Service	arran	gements		314
 (c) Pupils who receive (d) Other than (a), (b) 				on	***	15,607
Lymphatic Glan				***	***	25
Abdomen		***	***	***		27
Heart and Circu	ation	***	111	***	***	36
Lungs	***	***	555	***	***	474
Development Nervous System			***		***	115 119
Psychological		***	***	***		10
rsychological	***	***	***	***		10
	Total	(a) to	(d)	***	***	19,807

TABLE IV.

Number of pupils inspected :-						
(a) At periodic inspection						151,297
(b) As specials						10,75
	Total (1)				162,048
Number found to require trace						77.50
	tinent	***		***		77,56
						73,83 36,87
	by nuni	ls for		ent in		30,011
ing those recorded at 11 (h)						130,097
Half-days devoted to :-						
	tion					1,629
(b) Treatment						17,429
	Total (6)				19,058
Water						
	***				***	66,783 19,664
(o) rempetary toom			***			15,009
	Total (7)		***	***	86,446
Number of teeth filled :-						
(a) Permanent teeth	***			***		56,098
(b) Temporary teeth	***			***	***	16,968
	Total (8)				73,066
						100000
	***			***		6,724 18,447
(o) remporary toom			***	***	***	10,44
	Total (9)		•••	***	25,171
Administration of general an	aesthetic	s for	extract	ion		10,507
Orthodonties :						
	ing the v	ear				1,306
						3,228
(c) Cases completed durin	g the ye	ar		***	***	633
(a) Cases discontinued du	ring the	year	***	***	***	188
(f) Removable appliances	fitted				***	2,253
(g) Fixed appliances fitted	1					2,396
(h) Total attendances						22,768
Number of pupils supplied w	ith artifi	cial te	eth			146
				177.001	2000	
	1835					21,795
					***	10,116
	-		-	***	***	
	Total (1					31,911
	Number found to require trea Number offered treatment Number actually treated Number of attendances made ing those recorded at 11 (h) Half-days devoted to:— (a) Periodic (school) inspec (b) Treatment Fillings:— (a) Permanent teeth (b) Temporary teeth Number of teeth filled:— (a) Permanent teeth (b) Temporary teeth Extractions:— (a) Permanent teeth (b) Temporary teeth Extractions:— (a) Permanent teeth (b) Temporary teeth Administration of general an Orthodontics:— (a) Cases commenced durin (b) Cases carried forward (c) Cases completed durin (d) Cases discontinued du (e) Pupils treated with ap (f) Removable appliances (g) Fixed appliances fitted (h) Total attendances Number of pupils supplied w Other operations— (a) Permanent teeth (a) Permanent teeth (b) Capperations— (a) Permanent teeth	Number found to require treatment Number offered treatment Number actually treated Number of attendances made by pupi ing those recorded at 11 (h) Half-days devoted to:— (a) Periodic (school) inspection (b) Treatment Total (6) Fillings:— (a) Permanent teeth (b) Temporary teeth Total (7) Number of teeth filled:— (a) Permanent teeth (b) Temporary teeth Total (8) Extractions:— (a) Permanent teeth (b) Temporary teeth Total (9) Administration of general anaesthetic Orthodontics:— (a) Cases commenced during the ye (b) Cases carried forward from pre (c) Cases completed during the ye (d) Cases discontinued during the (e) Pupils treated with appliances (f) Removable appliances fitted (g) Fixed appliances fitted (g) Fixed appliances fitted (g) Fixed appliances fitted (h) Total attendances Number of pupils supplied with artification of the	Number found to require treatment Number offered treatment Number actually treated Number of attendances made by pupils for ing those recorded at 11 (h) Half-days devoted to:— (a) Periodic (school) inspection (b) Treatment (a) Permanent teeth (b) Temporary teeth (c) Total (7) Number of teeth filled:— (a) Permanent teeth (b) Temporary teeth (c) Total (8) Extractions:— (a) Permanent teeth (b) Temporary teeth Total (9) Administration of general anaesthetics for extended to the complete during the year (b) Cases completed during the year (c) Cases discontinued during the year (d) Cases discontinued during the year (e) Pupils treated with appliances (f) Removable appliances fitted (g) Fixed appliances fitted (h) Total attendances Number of pupils supplied with artificial to Other operations— (a) Permanent teeth (a) Permanent teeth (b) Total of the completed with artificial to Other operations— (a) Permanent teeth (b) Temporary teeth (c) Permanent teeth (d) Total attendances (e) Permanent teeth (f) Removable appliances fitted (g) Fixed appliances fitted (h) Total attendances Number of pupils supplied with artificial teeth (a) Permanent teeth (b) Temporary teeth (c) Permanent teeth (d) Cases completed with artificial teeth (e) Permanent teeth (f) Removable appliances fitted (g) Fixed appliances fitted (h) Total attendances (o) Permanent teeth (o) Permanent (o) Permanent	Number found to require treatment Number offered treatment Number actually treated Number of attendances made by pupils for treatment ing those recorded at 11 (h) Half-days devoted to :— (a) Periodic (school) inspection (b) Treatment Total (6) Fillings :— (a) Permanent teeth (b) Temporary teeth (a) Permanent teeth (b) Temporary teeth (c) Permanent teeth (b) Temporary teeth Total (8) Extractions :— (a) Permanent teeth (b) Temporary teeth Total (9) Administration of general anaesthetics for extract Orthodontics :— (a) Cases commenced during the year (b) Cases carried forward from previous year (c) Cases completed during the year (d) Cases discontinued during the year (e) Pupils treated with appliances (f) Removable appliances fitted (g) Fixed appliances fitted (h) Total attendances Number of pupils supplied with artificial teeth Other operations— (a) Permanent teeth	Number found to require treatment Number offered treatment Number actually treated Number of attendances made by pupils for treatment, in ing those recorded at 11 (h) Half-days devoted to :—	Number found to require treatment

SPEECH THERAPY - STATISTICAL REPORT FOR YEAR 1961.

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