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SURREY COUNTY COUNCIL

15 OCT 1961

ANNUAL REPORTS

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

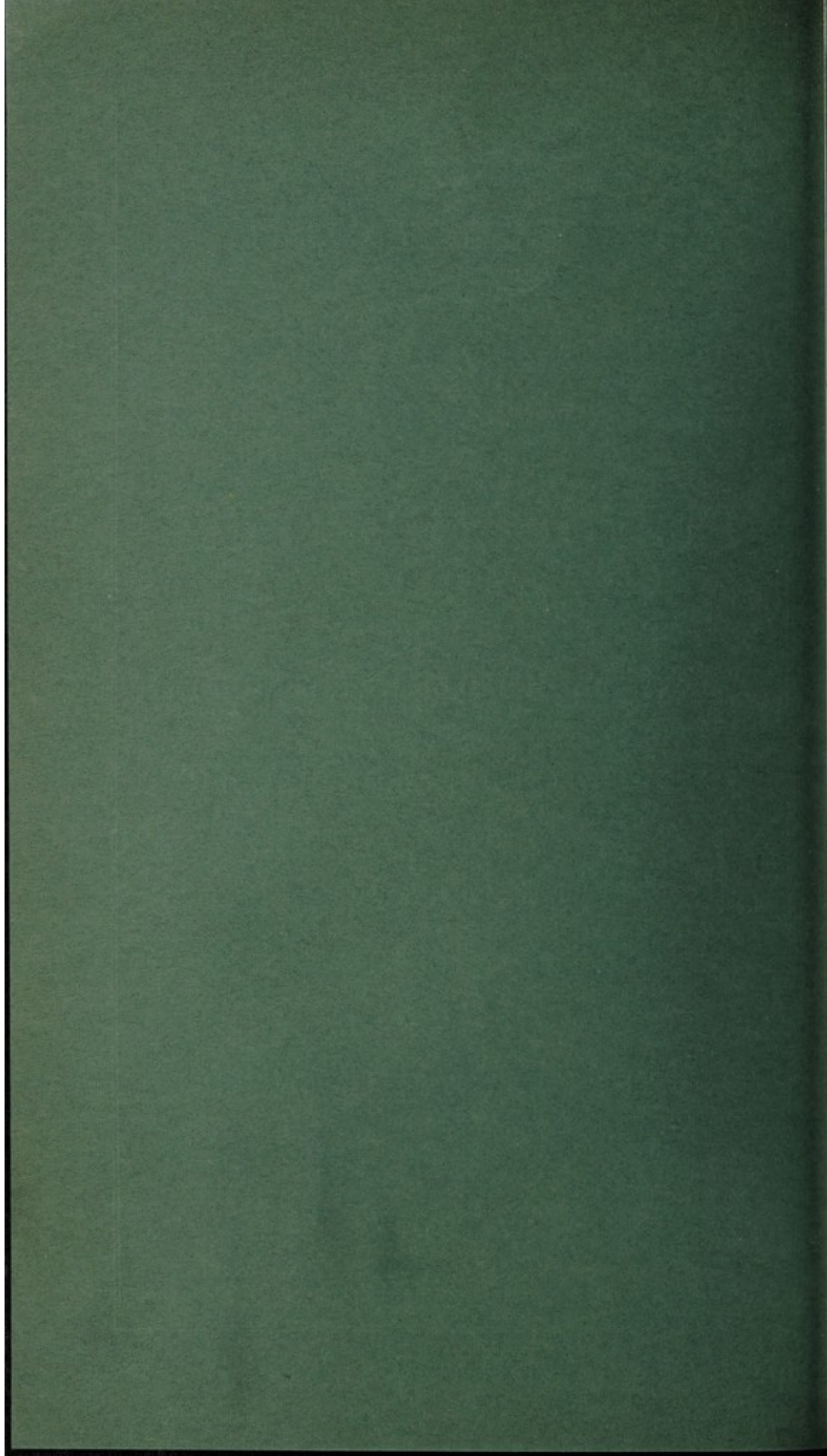
AND

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR

1963





Surrey County Council

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For the Year 1963

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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 1963: this has been prepared in accordance with Circular No. 1/64 of the Ministry of Health.

The population of the administrative county continues to increase, the Registrar-General's estimate at mid-year 1963 being 1,502,330, which is an increase of 11,330 over the corresponding estimate for 1962. It is notable that the whole of this increase in population took place in the part of the present County which will be included in the new Surrey after 1st April, 1965, and that the population of the part of the present County which will become part of Greater London actually showed a decrease of population.

The total number of live births in the County was 23,484 giving a live birth rate of 15.63 per thousand population, these figures compared with 23,054 and 15.46 for the County in 1962. The birth rate for England Wales in 1963 was 18.2. The still birth rate showed an encouraging fall from 325 (13.90 still births for 1,000 live and still births) to 273 (equivalent to a still birth rate of 11.49). The number of deaths of infants under 1 year was 401 giving an infant mortality rate of 17.08 per 1,000 live births. I have, in previous reports pointed out the difficulties which have been occasioned by the very substantial increase in the number of births taking place in the County each year. The number of births continues to rise and the difficulties persist. One of the worst features is the faulty selection of expectant mothers for hospital confinement, namely that the proportion of "high risk" high parity mothers confined in hospital is far too low. The attention of the Council is directed to the table on page 32: this shows by parity the number of women who had to be transferred to hospital during labour. When it is recalled that high parity mothers form only about 5 per cent of total confinements in the County and that they form nearly 20 per cent of total transfers in labour, it is quite clear that much more effort directed to persuading the high parity mother to accept hospital confinement is needed—even if this should be at the cost of more strict selection among the low parity mothers who contribute over 53 per cent of the total births.

The number of deaths and death rates both increased in 1963 as against the previous year (18,039 and 12.01 in 1963, 17,495 and 11.73 in 1962) but the total deaths from malignant disease fell slightly from 3,262 and 2.18 per thousand in 1962 to 3,180 and 2.12 per thousand in 1963: even in cancer of the lung and bronchus which has been increasing for many years there was a slight fall in incidence from 4.73 per thousand (827 deaths) to 4.45 per thousand (803 deaths). These figures are, of course, much too small to be accepted as an indication of an alteration in the prevailing trend.

Attention is drawn to the tables on pages 11 and 13 which give details of the deaths from violence. It is notable that the number of deaths from violence exceed almost tenfold the deaths from pulmonary tuberculosis. Nearly three-quarters of these deaths are due to accidents and almost a quarter due to accidents involving motor vehicles.

On page 35 a report on the working of the centre for the elderly by Dr. Morwood, the Divisional Medical Officer, is given. This centre obviously provides a valuable service to the elderly and the County Health Committee has expressed the hope that other centres on similar lines can be started elsewhere in the County.

A brief report on the chiropody service is given on page 57. The most important development was in the decision to appoint a Chief Chiropodist who should be mainly, but not entirely, administrative. This appointment has resulted in much improved control of the service, which, however, continues to expand. The service is mainly used by elderly people and is a very important contribution towards keeping them ambulant as long as possible.

The expansion in the Mental Health Services is proceeding satisfactorily. Both in the provision of staff for the domiciliary services and in premises for junior and adult mental subnormals and for cases of mental illness, schemes were steadily developing. Much interest attaches to the schemes for adult technical training units of which there were five at the end of the year. Various industrial undertakings have given contracts to the units and the sums paid for the work done are distributed between the patients at the centre. The earliest establishment and the largest is at Sutton where contracts to the value of £1,723 were dealt with during the year. It is with great pleasure that I record the many kindnesses shown to the workers at this centre by one of the firms for whom they have undertaken contracts: this is referred to in more detail in the body of the report (page 64).

It is most gratifying to report a substantial increase in the number of smoke control areas. This is a responsibility of the County Districts and the number of smoke control areas now in the County is a good index of the importance the County Districts rightly attach to the Clean Air Act of 1956.

The County Council's services under Section 29 of the National Assistance Act relating to the blind and partially sighted, the deaf and the hard of hearing and other persons substantially and permanently handicapped continue to expand. This applies especially to the latter categories

which have, in Surrey, been developed much later than the services for the blind and the partially sighted. Thus while the number of registered blind persons actually decreased from 2,702 in 1962 to 2,652 in 1963 and the deaf from 1,290 to 1,240, the number of persons registered as otherwise handicapped increased from 3,069 to 3,687: this increase is no doubt due to better ascertainment.

Once again I am able to draw attention to a continued improvement in the general condition of the school children in the County, in that only 246 (0.3 per cent) of the 72,200 children examined at routine medical inspections were classified as being in unsatisfactory physical condition. The number of children found to have defects requiring treatment was 9,534 (13.2 per cent).

Of necessity much of this report is devoted to the routine work required of the School Health Service. While not spectacular this occupies a high proportion of the time of the staff and is reflected in the very satisfactory condition of the children in the County. Other sections of the report are devoted to the developments taking place in the more specialised services. These are an indication of our increasing knowledge and awareness of the many problems facing the handicapped child, and our increasing ability to meet them. In view of advances in medical science which are resulting in the survival of more handicapped children beyond the early years of life, it is important that the School Health Service should be alert and ready to meet new demands as they arise.

I would draw your attention particularly to the development outlined in the section devoted to Audiology, in which the benefits of the integration of the speech and hearing services are described. Experience has shown that problems of communication in children cover a very wide field, and therefore close integration of all services concerned is of paramount importance. In this connection closer liaison is also advisable between speech and hearing clinics and child guidance, and this is being encouraged. Reference will also be found in the section dealing with handicapped pupils to the provision of two teachers of the deaf by the County at the unit for non-communicating children at Belmont Hospital which ensures a very valuable relationship with this important centre.

The section relating to handicapped children also makes reference to the increasing number of places being made available in special schools, an additional important factor in aiding the handicapped child.

In 1963 pulmonary tuberculosis affected 14 children, three teachers, and six ancillary staff, and was the cause of investigations in eleven schools. Happily there was no spread of infection in any of the incidents. Apart from measles, infectious diseases raised no particular problems, and the german measles epidemic of the previous year subsided. Finally I am pleased to report that no case of poliomyelitis occurred in the County during the year.

In referring to the excellent work of the staff of the department, both in the office and in the field, I should like to pay tribute to Dr. Fanning who was appointed Deputy County Medical Officer in 1948 and filled that post until his retirement early in 1963. Dr. Fanning was concerned particularly with the county ambulance service and the mental health service; the high standard of efficiency of the former and the solid basic organisation of the latter on which we are now building is an achievement of which he has every right to feel proud.

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.

No change affecting the area of the Administrative County or the boundaries of the County Districts took place during the year.

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 1963 was 1,502,330, an increase of 11,330 over the comparable figure for mid-year 1962. The population under 1 year is given by the Registrar-General as 22,900, the population 1-4 years as 88,100, and the population 5-14 years 205,600.

The Registrar-General's mid-year estimate of the population for the Urban and Rural areas during each of the five years 1959-1963 is shown in the following table :—

	1959	1960	1961	1962	1963
Urban Districts ...	1,275,000	1,287,550	1,299,100	1,309,640	1,316,610
Rural Districts ...	171,000	173,630	178,230	181,360	185,720
Administrative County	1,446,000	1,461,180	1,477,330	1,491,000	1,502,330
Increase or decrease over previous year ...	+13,000	+15,180	+16,150	+13,670	+11,330

The following table shows the population of each Sanitary District at the censuses of 1951 and 1961, and the Registrar-General's mid-year estimates for 1962 and 1963 :—

DISTRICTS		Area in Acres.	Census Population.		Registrar-General's Estimates of Mid-year populations.	
			1951	1961	1962	1963
M.B. and Urban.						
1.	Banstead	12,821	33,529	41,573	41,370	41,350
2.	Barnes	2,520	40,593	39,757	38,950	38,700
3.	Beddington and Wallington	3,045	32,757	32,588	32,600	32,560
4.	Carshalton	3,346	62,721	57,462	56,380	56,020
5.	Caterham and Warlingham	8,233	31,293	34,808	35,110	35,390
6.	Chertsey	9,983	30,852	40,376	41,790	42,720
7.	Coulsdon and Purley	11,143	63,773	74,738	74,260	74,200
8.	Dorking	9,511	20,252	22,594	22,540	22,700
9.	Egham	9,350	24,690	30,553	31,150	31,220
10.	Epsom and Ewell	8,427	68,055	71,177	70,380	70,700
11.	Esher	14,850	51,432	60,586	60,970	61,010
12.	Farnham	9,039	23,928	26,927	27,520	27,990
13.	Frimley and Camberley	7,768	20,386	30,342	31,650	33,140
14.	Godalming	2,393	14,244	15,771	16,940	17,210
15.	Guildford	7,323	48,048	53,977	54,100	54,340
16.	Haslemere	5,751	12,003	12,528	12,990	13,020
17.	Kingston-upon-Thames... ..	1,408	40,174	36,450	35,990	36,050
18.	Leatherhead	11,187	27,206	35,554	36,650	36,890
19.	Malden and Coombe	3,162	45,566	46,587	46,750	46,710
20.	Merton and Morden	3,234	74,730	67,974	67,560	67,090
21.	Mitcham	2,934	67,269	63,653	63,660	63,420
22.	Reigate	10,255	42,248	53,710	54,680	54,890
23.	Richmond	4,109	41,942	41,002	40,680	40,630
24.	Surbiton	4,710	60,875	62,940	63,170	63,450
25.	Sutton and Cheam	4,338	80,673	78,969	78,430	78,770
26.	Walton and Weybridge... ..	9,049	38,112	45,497	45,910	46,720
27.	Wimbledon	3,212	58,141	56,994	56,850	56,980
28.	Woking	15,708	47,596	67,485	70,610	72,740
	Total	198,809	1,203,088	1,302,572	1,309,640	1,316,610
Rural.						
1.	Bagshot	16,083	14,109	16,744	16,610	16,840
2.	Dorking and Horley	53,943	25,832	31,698	32,400	32,780
3.	Godstone	52,507	32,823	40,068	40,940	41,900
4.	Guildford	59,643	44,936	54,777	55,830	58,600
5.	Hambledon	68,175	31,851	34,790	35,580	35,600
	Total	250,351	149,551	178,077	181,360	185,720
Administrative County		449,160	1,352,639	1,480,649	1,491,000	1,502,330

The figures given by the Registrar-General express the populations for the 1951 Census as they would have appeared if the area boundaries at that time were the same as they are at present.

RATEABLE VALUE AND ESTIMATED PRODUCT OF A PENNY RATE.

The rateable value of the Administrative County on the 1st April, 1963, was £79,273,760, and the estimated product of a 1d. rate for general County purposes for the year 1963-64 was £322,072.

VITAL STATISTICS.

The principal vital statistics for the year 1963 are summarised below. Additional information is given in the paragraphs which follow:—

Live births	23,484
Live birth rate per 1,000 population	15.63
Still births	273
Still birth rate per 1,000 live and still births	11.49
Total live and still births	23,757
Infant deaths	401
Infant mortality rate per 1,000 live births	17.08
" " " " " legitimate births	16.49
" " " " " illegitimate births	27.55
Neo-natal mortality rate (first four weeks) per 1,000 live births	12.01
Early neo-natal mortality rate (first week) per 1,000 live births	10.48
Peri-natal mortality rate (still births and deaths under one week) per 1,000 live and still births	21.85
Illegitimate live births per cent of total live births	5.19
Maternal deaths (including abortion)	9
Maternal mortality rate per 1,000 total births	0.38

The following statement compares the County birth and death rates for the year 1963 with the previous year and with the mean of the five years 1958-62.

	Per 1,000 Population				Maternal Mortality per 1,000 Live and Still Births.	Deaths of Infants under 1 year per 1,000 Live Births.
	Live Birth Rate	Crude Death Rate	Death Rate from Pulmonary Tuberculosis.	Death Rate from Malignant Disease.		
1958	14.24	11.24	0.07	2.10	0.43	16.72
1959	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
1961	15.18	11.30	0.05	2.19	0.31	17.79
1962	15.46	11.73	0.04	2.19	0.09	16.57
Mean of 5 years, 1958-1962	14.81	11.37	0.05	2.15	0.29	17.40
1963	15.63	12.01	0.05	2.12	0.38	17.08
Increase or decrease in 1963 on:						
5 years average	+0.82	+0.64	—	—0.03	+0.09	—0.32
Previous year	+0.17	+0.28	+0.01	—0.07	+0.29	+0.51

Births and Birth Rate.

The live births registered in or belonging to the County during the year numbered 23,484, of which 12,071 were males and 11,413 females, as compared with 23,054 in the previous year, showing an increase of 430. The birth rate for the year was 15.63 as compared with 15.46 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 10 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 1.02, for the aggregate of Urban Districts 1.02 and for the Rural Districts 1.02. The effect of these factors on the 1963 crude live birth rates is shown below:—

	Administrative County.	Urban Districts.	Rural Districts.
	per 1,000 of estimated home population.		
Crude rates	15.63	15.40	17.28
Adjusted rates	15.94	15.71	17.63

The birth rate for England and Wales for 1963 was 18.2 and for 1962, 18.0.

In addition to the 23,484 live births in Surrey, there were 273 still births and the rate of still births per 1,000 live and still births was 11.49 as compared with an average rate of 15.17 for the quinquennial period of 1958-62.

Of the 23,484 live births 1,234 or 5.19 per cent. were illegitimate, as compared with 1,142 or 4.95 per cent. in 1962.

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
1941 ...	16,011	13.47	469	28.5	1,048	6.55
1942 ...	19,706	16.57	562	27.7	1,251	6.35
1943 ...	20,436	17.34	571	27.2	1,420	6.95
1944 ...	20,377	17.86	512	24.5	1,561	7.76
1945 ...	18,676	16.03	400	21.0	1,670	8.94
1946 ...	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
1954 ...	18,193	13.13	352	19.0	778	4.28
1955 ...	18,305	13.14	334	17.9	749	4.09
1956 ...	18,794	13.37	322	16.8	769	4.09
1957 ...	19,627	13.83	373	18.65	767	3.91
1958 ...	20,398	14.24	364	17.53	839	4.11
1959 ...	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
1962 ...	23,054	15.46	325	13.90	1,142	4.95
1963 ...	23,484	15.63	273	11.49	1,234	5.19

Deaths and Death Rate.

The number of deaths registered in the Administrative County during 1963 was 18,039, as compared with 17,495 in the year 1962. The crude death rate for 1963 was 12.01, compared with 11.73 for 1962. The death rate for England and Wales in 1963 was 12.2 compared with 11.9 for 1962.

Infant Mortality.

The number of infants under one year who died during 1963 was 401 compared with 382 in 1962. This represents an infant mortality rate of 17.08 per 1,000 live births as compared with a corresponding rate of 16.57 for the year 1962. The comparable figures for England and Wales were 20.9 in 1963 and 20.7 in 1962.

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

Year.	England and Wales.			Surrey.		
	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 ...	46.0	24.8	21.2	34.05	22.06	11.99
1946 ...	42.9	24.5	18.4	27.85	18.84	9.01
1947 ...	41.4	22.7	18.7	27.68	18.22	9.46
1948 ...	33.9	19.7	14.2	23.94	16.06	7.88
1949 ...	32.4	19.3	13.1	24.05	16.07	7.98
1950 ...	29.8	18.5	11.3	21.86	15.45	6.41
1951 ...	29.6	18.8	10.8	21.75	16.31	5.44
1952 ...	27.6	18.3	9.3	20.93	14.57	6.36
1953 ...	26.8	17.7	9.1	20.56	13.86	6.70
1954 ...	25.5	17.7	7.8	19.35	13.08	6.27
1955 ...	24.9	17.3	7.6	18.08	12.95	5.13
1956 ...	23.8	16.9	6.9	17.88	12.13	5.75
1957 ...	23.0	16.5	6.5	19.26	14.78	4.48
1958 ...	22.6	16.2	6.4	16.72	12.11	4.61
1959 ...	22.0	15.8	6.2	18.82	13.70	5.12
1960 ...	21.7	15.6	6.1	17.12	12.92	4.20
1961 ...	21.4	15.5	5.9	17.79	13.29	4.50
1962 ...	20.7	15.1	5.6	16.57	12.15	4.42
1963 ...	20.9	14.2	6.7	17.08	12.01	5.07

Maternal Mortality.

In 1963 9 women died from causes associated with pregnancy and child bearing including abortion. This gives a maternal mortality rate of 0.38 per 1,000 live and still births. The corresponding figures for England and Wales in 1963 were 244 and 0.28 : and for Surrey in 1962 were 2 and 0.09.

Causes of Death.

The grouped causes of death arranged in order of frequency in 1963 in the County were as follows :—

	Deaths	Percentage of Total Deaths
Diseases of the heart	5,853	32.45
Malignant disease	3,180	17.63
Bronchitis, pneumonia and other diseases of respiratory system	2,564	14.21
Vascular lesions of the central nervous system	2,326	12.89
Other circulatory diseases	905	5.02
Violent causes	721	4.00
Digestive diseases	219	1.21
Influenza... ..	167	0.93
Congenital malformations	144	0.80
Leukaemia, Aleukaemia	109	0.60
Diabetes	101	0.56
Hyperplasia of prostate	89	0.49
Tuberculosis (all forms)	89	0.49
Nephritis and Nephrosis	88	0.49
All other causes	1,484	8.23
	18,039	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 1963:—

DISTRICTS	Live births.			Adjusted birth rate.	Still births.	Rate per 1,000 live and still births.	Deaths.	Crude death rate.	Standardised death rate.	Excess of births over deaths.	Infants dying		
	M.	F.	Total								under 1 week.	1-4 weeks.	4 weeks to 12 months.
M.B. and Urban													
Banstead...	275	292	497	12.02	13.58	6	506	12.24	9.79	-9	5	1	4
Barnes...	309	258	567	14.65	14.80	3	541	13.98	11.46	+26	8	—	5
Beddington and Wallington	254	268	462	14.19	15.47	4	360	11.06	10.51	+102	6	—	2
Carshalton...	345	352	697	12.81	12.81	3	646	11.53	12.45	+51	5	1	2
Caterham and Warlingham	294	283	577	16.30	15.97	8	376	10.62	10.41	+201	5	—	3
Chertsey...	431	439	870	20.37	17.31	13	395	9.25	11.10	+475	7	—	5
Coulsdon and Purley	594	515	1,109	14.95	16.39	12	994	13.40	10.32	+115	10	3	4
Dorking...	179	186	365	16.08	15.69	5	292	11.54	10.50	+103	3	—	1
Egham...	225	240	465	14.89	13.55	6	329	10.54	10.65	+136	4	1	—
Epsom and Ewell	464	426	890	12.59	14.23	14	1,114	15.76	9.93	-224	16	4	4
Esher...	455	406	861	14.11	15.38	9	634	10.39	10.70	+227	10	2	3
Farnham...	231	221	452	16.15	17.44	7	406	14.50	10.44	+46	2	1	—
Frimley and Camberley	435	408	843	25.44	22.13	17	262	7.91	10.28	+581	13	—	5
Godalming...	136	164	300	17.43	17.26	3	212	12.32	12.07	+88	5	—	—
Guildford	453	411	864	15.90	15.11	18	588	10.82	10.39	+276	9	3	5
Haslemere	80	73	153	11.75	13.03	2	198	15.21	11.41	-45	1	—	7
Kingston-upon-Thames	336	328	664	18.42	18.42	3	479	13.29	11.83	+185	5	2	2
Leatherhead	266	272	538	14.58	15.75	2	365	9.80	10.68	+173	4	—	5
Malden and Coombe	312	279	591	12.65	13.16	4	506	12.12	11.76	+25	6	1	4
Merton and Morden	424	444	868	12.94	14.75	12	825	12.30	12.18	+43	9	2	4
Mitcham	503	479	982	15.48	15.94	9	706	11.13	12.80	+276	10	—	—
Reigate	422	401	823	14.99	15.59	5	748	13.63	11.31	+75	11	1	3
Richmond	323	333	656	16.15	15.83	5	600	16.24	12.02	-4	4	—	3
Surbiton...	531	480	1,011	15.93	15.93	7	703	12.03	12.63	+248	11	2	1
Sutton and Cheam	635	597	1,232	15.64	15.64	16	1,080	13.71	11.93	+152	13	3	5
Walton and Weybridge	372	358	730	15.63	16.07	8	518	11.09	10.20	+212	6	—	2
Wimbledon	499	452	951	16.69	15.86	16	748	13.13	11.55	+203	14	1	10
Woking	641	616	1,257	17.28	17.11	15	806	11.08	9.97	+451	9	1	3
Total	10,424	9,851	20,275	15.40	15.71	232	16,087	12.22	11.36	+4,188	211	31	92
Rural													
Bagshot...	173	154	327	19.42	18.84	5	172	10.21	10.21	+155	3	—	4
Dorking and Horley	309	272	581	17.72	17.72	10	333	10.16	11.18	+248	8	—	8
Godstone	353	317	670	15.99	16.31	8	499	11.91	10.12	+171	9	3	6
Guildford	553	539	1,112	18.98	19.36	9	536	9.15	10.07	+576	12	1	4
Hambleton	259	260	519	14.58	15.75	9	412	11.57	10.18	+107	3	1	5
Total	1,647	1,562	3,209	17.28	17.63	41	1,952	10.51	10.40	+1,257	35	5	27
Administrative County	12,071	11,413	23,484	15.63	15.94	273	18,039	12.01	11.17	+5,445	246	36	119

* The standardised death rate is based on information supplied by the Registrar-General, and the effect of standardising the death rate is to adjust the population of a district in regard to sex and age distribution so as to make the death rate of that district truly comparable with those of other districts and with the country as a whole.

The infant mortality rates in the urban and the rural districts respectively were 16.47 and 17.08, the neo-natal mortality rates for the urban and the rural districts respectively were 11.94 and 12.46 and the early neo-natal mortality rates for the urban and rural districts respectively were 10.41 and 10.91.

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 1963, 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:—

DISTRICTS.	Heart and Vascular Disease.						Malignant Disease.						Respiratory diseases (Non-Tuberculous)		Violence.											
	Vascular lesions of nervous system.		Coronary disease, angina.		Hypertension with heart disease.		Other heart disease.		Other circulatory disease.		Malignant neoplasm, stomach.				Malignant neoplasm, lung, bronchus.		Malignant neoplasm, breast.		Malignant neoplasm, uterus.		Other malignant and lymphatic neoplasms.					
	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000			No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000	No.	Rate per 1,000				
M.B. and Urban.																										
Banstead	65	1.57	89	2.15	8	.19	79	1.91	30	.73	4	.10	77	1.86	9	.22	15	.36	10	.24	1	.02	48	1.16	18	.44
Barnes	73	1.89	109	2.82	9	.23	49	1.27	31	.80	1	.03	71	1.83	11	.28	23	.59	16	.41	4	.10	54	1.40	22	.51
Beddington and Wallington	37	1.14	78	2.40	6	.18	45	1.38	32	.68	—	—	38	1.17	6	.18	18	.55	2	.06	5	.15	45	1.38	13	.40
Caterham and Warlingham	44	1.24	72	2.03	4	.11	49	1.38	13	.37	—	—	60	1.66	9	.16	45	.80	12	.21	7	.12	68	1.21	20	.36
Chertsey	50	1.17	64	1.50	7	.16	60	1.40	16	.37	2	.05	62	1.45	5	.12	19	.44	7	.16	—	—	32	.75	17	.40
Coulsdon and Purley	134	1.81	197	2.65	17	.23	110	1.48	45	.61	6	.08	173	2.33	14	.19	30	.40	20	.27	3	.04	77	1.04	45	.61
Dorking	39	1.72	48	2.11	1	.04	40	1.59	16	.70	2	.06	41	1.31	5	.16	10	.32	5	.16	4	.13	31	.99	17	.54
Ednam	40	1.28	57	1.83	1	.03	61	1.95	21	.67	—	—	41	1.31	5	.16	10	.32	5	.16	4	.13	31	.99	17	.54
Epsom and Ewell	134	1.90	179	2.53	20	.28	111	1.57	54	.76	6	.08	213	3.01	24	.34	30	.42	21	.39	7	.10	88	1.24	35	.50
Essex	79	1.29	108	1.77	12	.20	81	1.33	38	.62	3	.05	78	1.28	11	.18	29	.48	10	.16	5	.08	62	1.02	27	.44
Farnham	68	2.43	70	2.50	4	.20	55	2.94	22	.79	2	.07	54	1.93	8	.29	11	.39	3	.11	2	.07	31	1.11	26	.56
Frimley and Camberley	30	.91	44	1.33	4	.12	40	1.21	16	.48	2	.06	34	1.03	6	.23	16	.48	4	.12	—	—	25	.75	13	.39
Gosdington	24	1.39	56	3.25	4	.23	14	1.81	8	.46	—	—	32	1.86	6	.35	11	.64	3	.12	—	—	20	1.16	13	.37
Guildford	58	1.07	102	1.88	8	.15	59	1.09	25	.46	1	.02	89	1.64	13	.24	30	.55	9	.17	5	.09	71	1.31	28	.52
Haslemere	34	2.61	44	3.38	—	—	19	1.46	11	.84	1	.08	24	1.84	2	.15	7	.54	2	.15	1	.03	41	1.14	19	.53
Kingston-upon-Thames	64	1.78	87	2.41	15	.42	50	1.39	31	.86	4	.11	54	1.50	6	.17	26	.72	3	.08	1	.03	41	1.14	19	.53
Leatherhead	47	1.27	57	1.55	4	.11	44	1.19	15	.41	1	.03	40	1.08	8	.22	18	.49	8	.22	2	.05	41	1.11	22	.60
Malden and Coombe	79	1.69	121	2.59	10	.21	84	1.80	28	.60	3	.06	60	1.28	6	.13	29	.62	9	.19	3	.06	43	.92	18	.39
Merton and Morden	89	1.33	207	3.09	12	.18	84	1.25	37	.55	2	.03	112	1.67	21	.31	41	.61	20	.30	2	.03	79	1.18	24	.36
Mitcham	92	1.45	144	2.27	7	.11	71	1.12	22	.35	3	.05	104	1.64	20	.32	44	.69	16	.25	4	.06	57	.90	35	.55
Reigate	109	1.99	132	2.40	17	.31	104	1.89	26	.47	3	.05	129	2.35	11	.20	24	.44	19	.35	2	.04	45	.82	28	.51
Rebmond	105	2.58	129	3.17	5	.12	71	1.75	31	.76	—	—	79	1.94	17	.42	28	.69	17	.42	3	.07	58	1.43	24	.59
Sarbiton	92	1.45	122	2.40	14	.22	83	1.31	42	.66	5	.08	93	1.47	17	.27	40	.63	23	.36	3	.05	67	1.06	31	.49
Sutton and Cheam	145	1.84	176	2.23	20	.25	162	2.06	57	.72	—	—	168	2.13	20	.25	41	.52	29	.37	5	.06	89	1.13	37	.47
Walton and Weybridge	58	1.24	99	2.12	6	.13	46	.98	34	.73	2	.04	68	1.46	8	.17	25	.54	9	.19	—	—	52	1.11	21	.45
Wimbledon	96	1.68	161	2.83	8	.14	63	1.11	38	.67	6	.11	103	1.81	16	.28	40	.70	9	.16	7	.12	67	1.18	30	.53
Woking	94	1.29	110	1.51	7	.10	154	2.12	49	.67	—	—	106	1.46	13	.28	39	.54	11	.15	6	.08	68	.93	32	.44
Total	2,953	1.56	3,027	2.30	240	.18	1,953	1.48	810	.62	63	.05	2,277	1.73	394	.23	720	.55	394	.23	85	.06	1,437	1.09	637	.48
Rural.																										
Busbott	23	1.37	29	1.72	1	.06	27	1.60	9	.53	3	.18	22	1.31	2	.12	5	.30	1	.06	2	.12	10	.59	14	.83
Porting and Hoxley	36	1.10	65	1.98	4	.12	36	1.10	14	.43	1	.03	53	1.62	8	.24	13	.40	8	.24	1	.03	26	.79	23	.70
Godstone	71	1.69	100	2.39	4	.10	42	1.00	26	.62	2	.05	84	2.00	7	.17	22	.53	8	.19	3	.07	40	1.10	14	.33
Guildford	72	1.23	104	1.77	11	.19	64	1.09	25	.43	3	.05	65	1.11	15	.26	27	.46	13	.22	3	.05	50	.85	21	.36
Hambleton	71	1.99	86	2.42	3	.08	57	1.60	21	.59	1	.03	63	1.77	4	.11	16	.45	6	.17	—	—	34	.96	12	.34
Total	273	1.47	384	2.07	23	.12	226	1.22	95	.51	10	.05	287	1.55	36	.19	83	.45	36	.19	9	.05	106	.89	84	.45
Administrative County 1963																										
Percentage of Total Deaths in 1963	12.89	18.91	18.91	1.46	1.46	12.08	12.08	12.08	5.02	0.43	78	.05	14.21	14.21	1.88	4.45	4.45	4.45	1.88	1.88	94	.06	1.603	1.07	721	.48
	(12.73)	(19.15)	(19.15)	(1.65)	(1.65)	(12.08)	(12.08)	(12.08)	(4.98)	(0.34)	(0.34)	(0.34)	(12.42)	(12.42)	(1.84)	(4.73)	(4.73)	(4.73)	(2.08)	(2.08)	(0.78)	(0.78)	(8.89)	(9.21)	4.00	(4.25)

The figures shown in brackets relate to the year 1962.

ADMINISTRATIVE COUNTY OF SURREY.

Causes of Death at Different Periods of Life, 1963.

The causes of all deaths during 1963 are classified in age groups for the aggregate of urban districts and for the aggregate of rural districts in the following table :—

Causes of Death.	Sex	Aggregate of Urban Districts.										Aggregate of Rural Districts.									
		All Ages	0-	1-	5-	15-	25-	45-	65-	75-	All Ages	0-	1-	5-	15-	25-	45-	65-	75-		
All Causes	M.	7,737	205	46	38	97	297	2,135	2,056	2,863	966	38	7	9	14	26	236	246	390		
	F.	8,350	129	31	20	34	195	1,282	1,736	4,923	986	29	5	2	2	24	161	198	565		
1. Tuberculosis, Respiratory ...	M.	49	—	—	—	1	5	21	11	11	7	—	—	—	—	1	2	2	2		
	F.	19	—	—	—	—	5	8	3	3	3	—	—	—	—	—	—	2	1		
2. Tuberculosis, Other ...	M.	4	—	—	—	—	1	2	—	1	—	—	—	—	—	—	—	—	—		
	F.	7	—	1	—	1	2	1	2	—	—	—	—	—	—	—	—	—	—		
3. Syphilitic Disease ...	M.	16	—	—	—	—	—	8	5	3	1	—	—	—	—	—	—	—	1		
	F.	15	—	—	—	—	—	2	7	6	1	—	—	—	—	—	—	—	1		
4. Diphtheria	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
5. Whooping Cough ...	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
6. Meningococcal Infections ...	M.	2	1	1	—	—	—	—	—	—	1	1	—	—	—	—	—	—	—		
	F.	1	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
7. Acute Poliomyelitis ...	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
8. Measles	M.	2	—	1	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	4	—	—	4	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
9. Other Infective and Para- sitic Diseases	M.	21	1	1	1	—	6	7	—	5	3	2	—	—	—	—	1	—	—		
	F.	11	1	1	—	1	2	2	1	3	—	—	—	—	—	—	—	—	—		
10. Malignant Neoplasm, Stomach	M.	171	—	—	—	—	4	61	56	50	21	—	—	—	—	—	5	6	10		
	F.	133	—	—	—	—	2	30	39	62	15	—	—	—	—	1	5	6	3		
11. Malignant Neoplasm, Lung, Bronchus	M.	594	—	—	—	—	10	301	200	83	66	—	—	—	—	3	27	25	11		
	F.	126	—	—	—	—	—	59	43	24	17	—	—	—	—	—	10	4	3		
12. Malignant Neoplasm, Breast	M.	3	—	—	—	—	1	1	—	1	1	—	—	—	—	—	1	—	—		
	F.	301	—	—	—	—	18	144	64	75	35	—	—	—	—	1	15	9	10		
13. Malignant Neoplasm, Uterus	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	85	—	—	—	—	6	26	26	27	9	—	—	—	—	1	5	2	1		
14. Other Malignant and Lymphatic Neoplasms	M.	741	2	4	3	9	40	245	202	236	82	—	—	—	—	2	30	23	27		
	F.	696	—	3	2	6	36	222	168	259	84	—	—	1	—	4	28	19	32		
15. Leukæmia, Aleukæmia ...	M.	58	—	5	1	2	6	21	14	9	4	—	2	—	—	—	1	—	1		
	F.	41	1	2	3	—	3	14	8	10	6	—	1	—	—	1	1	2	1		
16. Diabetes	M.	44	—	—	—	1	2	8	17	16	2	—	—	—	—	—	—	—	2		
	F.	53	—	—	—	—	2	6	17	28	2	—	—	—	—	—	1	—	1		
17. Vascular Lesions of Nervous System	M.	724	—	1	—	—	10	140	213	360	95	—	—	—	—	1	10	31	53		
	F.	1,329	—	1	—	1	10	149	290	878	178	—	—	—	—	2	21	36	119		
18. Coronary Disease, Angina...	M.	1,791	—	—	—	—	46	654	584	507	225	—	—	—	—	5	82	69	69		
	F.	1,236	—	1	—	—	8	148	346	733	159	—	—	—	—	—	23	40	96		
19. Hypertension with Heart Disease	M.	92	—	—	—	1	1	19	26	45	9	—	—	—	—	—	2	3	4		
	F.	173	—	—	—	—	2	12	37	122	18	—	—	—	—	—	—	7	11		
20. Other Heart Disease ...	M.	616	—	—	—	5	13	79	97	422	90	—	—	—	—	1	5	13	71		
	F.	1,312	—	—	—	—	8	85	164	1,055	132	—	—	—	—	3	8	22	99		
21. Other Circulatory Disease ...	M.	348	—	—	—	2	9	75	93	169	38	—	—	—	—	1	9	7	21		
	F.	462	—	—	—	3	8	45	108	298	57	—	—	—	—	—	8	10	39		
22. Influenza	M.	62	3	1	3	2	1	13	10	29	6	—	—	—	—	—	2	3	1		
	F.	90	1	—	—	—	3	5	17	64	9	—	—	—	—	—	2	—	7		

Continued overleaf

The causes of all deaths during 1963 are classified in age groups for the aggregate of urban districts and for the aggregate of rural districts in the following table :—

[illegible]

Infectious Diseases : Notifications and Deaths.

The following table shows the incidence of infectious disease in the County during the year 1963, giving the number of cases of each disease notified and the attack rate :—

Disease.	1963	
	Number of cases notified.	Attack-rate per 1,000 population.
Acute encephalitis—		
Infective	1	0.001
Post infectious	4	0.003
Acute pneumonia	382	0.25
Acute poliomyelitis—		
Paralytic	—	—
Non-paralytic	—	—
Diphtheria	—	—
Dysentery	1,086	0.72
Enteric or Typhoid fever	20	0.01
Erysipelas	45	0.03
Food poisoning	83	0.06
Measles, excluding Rubella	20,948	13.94
Meningococcal infection	3	0.002
*Ophthalmia neonatorum	1	0.043
Paratyphoid fever	27	0.018
†Puerperal pyrexia	310	13.05
Scarlet fever	431	0.29
Tuberculosis—Pulmonary	348	0.23
Non-pulmonary	46	0.03
Whooping cough	554	0.37

* Rate per 1,000 live births.

† Rate per 1,000 live and still births.

It will be especially noted that no cases of poliomyelitis, either paralytic or non-paralytic, occurred during the year and for the fourth consecutive year no cases of diphtheria were notified.

Of the twenty cases of Enteric or Typhoid fever notified during the year, ten related to bacteriologically confirmed cases of typhoid fever associated with the outbreak at Zermatt, Switzerland, and occurred during March, 1963. All typhoid organisms isolated and tested in these cases proved to be of phage type E.1, which is the commonest type found in this country.

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

Measles	6 (1)
Whooping Cough	— (—)
Diphtheria	— (—)
Influenza	167 (90)
Meningococcal infection	4 (1)
Acute Poliomyelitis	— (—)

The figures in brackets relate to the year 1962.

Tuberculosis.

NOTIFICATIONS.

The summary of returns for 1963 from the Medical Officers of Health of County Districts shows that primary notifications were received in respect of 364 cases of pulmonary tuberculosis and 47 cases of non-pulmonary tuberculosis during the year.

The notifications and the case rates for pulmonary tuberculosis and for other forms of tuberculosis in 1963 and in certain preceding years were as follows :—

Year.	PULMONARY TUBERCULOSIS		OTHER FORMS OF TUBERCULOSIS.	
	Primary cases notified.	Case-rate per 1,000 population.	Primary cases notified.	Case-rate per 1,000 population.
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
1962	449	0.30	55	0.04
1963	364	0.24	47	0.03

It is interesting to note from Chest Physicians' reports, that the method of diagnosis of 292 of the 364 notifications of pulmonary tuberculosis was as follows :—

General Practitioners	...	...	...	...	126
Mass X-ray	...	...	...	...	40
G.P. referral X-ray	...	...	...	...	50
Contacts	...	...	...	...	23
Others	...	...	...	...	53
Total	...	...	...	...	292

The number of notified primary cases of pulmonary tuberculosis and the case rate per 1,000 population fell in 1963 to 364 and 0.24 respectively.

The number of patients on the registers who had a positive sputum within the last six months of 1963 was 118, a decrease of 44 from the total of the previous year.

There was a decrease of 8 in the number of notifications of non-pulmonary tuberculosis in 1963 in comparison with the 1962 figure. The case rate fell to 0.03 per 1,000 population.

The case rates for Surrey, compared with those for England and Wales in 1963, were as follows :—

	Surrey.	England and Wales.
Pulmonary Tuberculosis	0.24 per 1,000	0.35 per 1,000
Non-Pulmonary Tuberculosis	0.03 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 :—

Age period.	Pulmonary.		Non-Pulmonary.		Totals.
	Male.	Female.	Male.	Female.	
Under one year	—	1	—	—	1
One and under 2 years	—	1	1	—	2
2 " " 5	2	3	—	4	9
5 " " 10	2	1	—	1	4
10 " " 15	4	3	—	—	7
15 " " 20	5	7	—	—	12
20 " " 25	19	27	—	1	47
25 " " 35	26	34	4	9	73
35 " " 45	28	20	—	6	54
45 " " 55	52	18	6	3	79
55 " " 65	60	9	1	3	73
65 " " 75	21	8	1	4	34
75 and upwards	7	6	—	3	16
Totals	226	138	13	34	411
1962	301	148	14	41	504
1961	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

DEATHS.

The numbers of deaths and the death rates for pulmonary tuberculosis and other forms of tuberculosis in 1963 and in certain preceding years were as follows :—

Year.	Pulmonary Tuberculosis.		Other forms of Tuberculosis.	
	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
1962	59	0.04	6	0.004
1963	63	0.04	8	0.005

Provisional death rates for England and Wales in 1963 were as follows :—

Pulmonary tuberculosis	0.056 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 1963, 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 1963 some 215 tuberculous patients (of whom 180 were notified cases) died as follows :—

	<i>Pulmonary.</i>	<i>Non-Pulmonary.</i>	<i>Total.</i>
Deaths allocated by the Registrar General (tuberculosis being the sole or underlying cause)	63	8	71
Deaths not allocated by the Registrar General (tuberculosis being one of the causes but not the sole or underlying cause)	61	1	62
Deaths not allocated by the Registrar General (tuberculosis not being one of the causes)	74	8	82
	<u>198</u>	<u>17</u>	<u>215</u>

There were 35 deaths of unnotified cases of tuberculosis in 1963 as follows :—

<i>In Hospitals.</i>	<i>At Home, etc.</i>	<i>Total.</i>
22	13	35

The corresponding total for 1962 was 40.

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, 1963, were as follows :—

	<i>Pulmonary</i>	<i>Non-Pulmonary</i>
Males	4,362	299
Females	3,094	479
Totals	7,456	778
Grand Total	8,234	

The total of 8,234 is a decrease of 510 as compared with the figure of 8,744 for 1962. The number of pulmonary cases has fallen by 475 and the non-pulmonary figure has decreased by 35. The corresponding total for 1961 was 9,747.

During 1963, 258 cases were transferred in from outside the County and 339 were transferred out. The names of 650 patients were removed from the Register on the grounds of recovery.

The total of 6,861 cases on chest clinic registers for 1963, as set against 8,234 on the District Medical Officers' registers, represents a difference of 1,373. 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.



MENTAL HEALTH

An Art-Craft group in one of the Surrey Junior Training Centres, with psychotic child working apart.



AMBULANCE SERVICE

Ambulance crews show their skill at the Surrey Ambulance Efficiency Competition held at the Ambulance Training Centre.



AUDIOLOGICAL SERVICE

Surrey mother with child wearing newly-fitted hearing aid. (By courtesy of "Family Doctor")



GERIATRIC CLINIC

Group physiotherapy in progress at one of the special sessions for the elderly.

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
Gatwick	Ambulance Sub-station	March, 1964.
Stafford Road, Caterham	Welfare Centre/School Clinic	September, 1963.
The Forum, West Molesey	Welfare Centre/School Clinic	February, 1964.
Kings Road, Richmond	Improvements to existing Welfare Centre/ Divisional Office	December, 1963.
King George's Hall, Esher	Improvements to existing Welfare Centre/ School Clinic	April, 1964.
Guildford Training Centre	Prefabricated Work Unit to ease over- crowding	September, 1963.
Farnham, 4 self-contained flats with garages	District Nurses/Midwives residential accom- modation	December, 1963.

Progress has also been made with some of the outstanding projects as the following table shows :—

Project.	Purpose.	Present Position.
1962-63 CAPITAL BUILDING PROGRAMME.		
Shotfield Road/Stanley Park Road, Wallington	Welfare Centre/School Clinic ...	Building work in progress.
Bury Fields, Guildford	Welfare Centre/School Clinic ...	Building work in progress.
Victoria Road, Horley	Welfare Centre/School Clinic/two flats for nurses	Building work in progress.
Manor Drive, Malden	Welfare Centre/School Clinic ...	Building work in progress.
Church Street, Epsom	Welfare Centre/School Clinic and Ambulance Sub-Station	Building work in progress.
Warlingham-Sanderstead	Ambulance Sub-Station	Site being sought.
Blindley Heath	Ambulance Sub-Station	Building work in progress.
Richmond	Ambulance Sub-Station	Sketch plan being prepared.
Training Centre for Subnormals, Kingston	Purpose-built Centre to replace exist- ing unsuitable premises	Building work in progress.
Training Centre for Subnormals, Caterham	Purpose-built Centre to replace exist- ing unsuitable premises at Purley and Reigate	Building work in progress.
Temporary Special Work Unit, Ban- stead	Temporary premises to replace exist- ing premises and to ease over- crowding	Building work in progress.
Hostel for former Mentally Ill Per- sons, Wallington	Adaptations of 75, Woodcote Road, Wallington, as Hostel for employ- able persons suitable to live and work in the community	Building work in progress.
Hostel for Adult Subnormal Females, West Molesey	Purpose-built Hostel, subject to plan- ning consent, on site available at West Molesey	Sketch plans being prepared.
Malden	4 Flats, with garages for Nurse/ Mid- wives	Work in progress.
Dorincourt, Woodham Rise, Horsell, Woking	Extension of provision for care of unmarried mothers and their babies	Work in progress.
1963-64 CAPITAL BUILDING PROGRAMME.		
Tattenham Crescent, Banstead ...	Welfare Centre/School Clinic ...	Tender accepted.
Rectory Park, Sanderstead	Welfare Centre/School Clinic ...	Tender accepted.
Berkshire Road, Camberley	Welfare Centre/School Clinic ...	Tender accepted.
Ashburnham Road, Ham	Welfare Centre/School Clinic ...	Tender accepted.
Walton Lodge Estate, Banstead ...	Welfare Centre/School Clinic ...	Tenders invited.
Lloyd Avenue/The Mount, Car- shalton	Welfare Centre/School Clinic ...	Tender accepted.
Banstead	6 bay extension to Ambulance Sub- Station and temporary Control	Tender accepted.
St. Helier	Canteen and Recreational extension to Ambulance Main Station	Building work in progress.

Project.	Purpose.	Present Position.
1963-64 CAPITAL BUILDING PROGRAMME—cont.		
Surbiton	Ambulance Sub-Station	Building work in progress.
Junior Training Centre for Sub-normals, Weybridge	Purpose-built Centre to replace existing unsuitable premises	Sketch plans being prepared.
Special Work Unit, Banstead ...	Purpose-built Unit to cater for adult subnormals	Sketch plans being prepared.
Special Work Unit, Leatherhead ...	Work Unit to cater for adult subnormals at present attending Training Centres in the area	Site being sought.
1964-65 CAPITAL BUILDING PROGRAMME.		
Molesley Road, Hersham	Welfare Centre/School Clinic ...	Tender accepted.
Gresham Road, Oxted	Welfare Centre/School Clinic ...	Negotiating for a site.
Giggs Hill Green, Thames Ditton ...	Welfare Centre/School Clinic ...	Negotiating for a site.
Ashbourne Road, Mitcham	Welfare Centre/School Clinic ...	Site acquired.
Eastwick Park, Great Bookham ...	Welfare Centre/School Clinic and two self-contained flats for Nurses/Midwives	Sketch plans being prepared.
Woodfield Lane, Ashted	Welfare Centre/School Clinic/Nurse's Flats	Sketch plans and estimate approved.
Banstead	Ambulance Control, Training School, Store, etc.	Sketch plans being prepared.
Wimbledon	Ambulance Sub-Station	Alternative site being sought.
Haslemere	Extension to Ambulance Sub-Station	Sketch plans being prepared.
Walton	Ambulance Sub-Station	Site acquired.
Esher	Ambulance Sub-Station	Negotiating for a site.
Chertsey	Canteen, Recreational and 4 bay extension to Main Ambulance Station	Site being acquired.
Leatherhead	Ambulance Sub-Station	Site being sought.
Reigate	Five self-contained flats for District Nurses/Midwives with garages	Site being sought.
Epsom... ..	Redevelopment of present site to provide a block of self-contained flats and a Training Home for district nursing staff	Planning permission being sought.
Social Club, Epsom	Adaptation of Waterloo Road Clinic, Epsom, as Social Club to meet special needs of Epsom	Awaiting vacation of premises.
Hostel for Confused Elderly, Godalming	Purpose-built hostel for Confused Elderly persons not in need of hospital care and unsuitable for admission to County Welfare Homes	Site being negotiated.
Hostel for Adult Subnormal Males, Horley	Purpose-built hostel subject to planning consent, on site to be found in the Horley area	Site being sought.
Special Work Unit, Walton-on-Thames	Purpose-built unit to cater for adult subnormals	Site obtained. Sketch plans being prepared.
Special Work Unit, Reigate ...	Purpose-built unit to cater for adult subnormals	Site being sought.
Special Work Unit, Guildford ...	Purpose-built unit to cater for adult subnormals	Site being sought.

Prevention of Break-up of Families.

There were 435 families on the lists kept by Divisional Medical Officers at the end of 1963.

These 435 families may be classified as failing or having difficulties under the following headings :—

Failing or Difficulty.	No. of Families.	Percentage of all Families.	Failing or Difficulty.	No. of Families.	Percentage of all Families.
1. <i>Marital.</i>			4. <i>Housewifery and Child Care.</i>		
Marital	207	47.6	Housewifery	143	32.9
			Care of Children	168	38.6
2. <i>Material Needs.</i>			5. <i>Desertion.</i>		
Housing	168	38.6	Desertion by one Parent	51	11.7
Employment	111	25.5			
Financial	259	59.5	6. <i>Delinquency.</i>		
3. <i>Physical, Mental and Psychological Disorders.</i>			Adult Delinquency and/or Imprisonment ...	65	14.9
Emotional Immaturity	139	32.0	Juvenile Delinquency (Real or potential) ...	60	13.8
Mental Illness	91	20.9			
Alcoholism and Drug Addiction	10	2.3	7. <i>Other Reasons</i>	20	4.6
Drunkenness	29	6.7			
Mental Subnormality ...	27	6.2			
Low Intelligence	110	25.3			
Physical Illness	97	22.3			

The following table expresses in group form the failings and difficulties of families.

Group of Failings or Difficulties.	No. of Families.	Percentage of all Families.	Group of Failings or Difficulties.	No. of Families.	Percentage of all Families.
1. Marital	207	47.6	4. Housewifery and Child Care	214	49.2
2. Material Needs	332	76.3	5. Desertion	51	11.7
3. Physical, Mental and Psychological Disorders	305	70.1	6. Delinquency	113	26.0
			7. Other reasons	20	4.6

Typical combinations of failings and difficulties, expressed in group form, experienced by families were as follows :—

Groups.	No. of Families.	Percentage of all Families.	Groups.	No. of Families.	Percentage of all Families.
Nos. 2 and 3	230	52.9	Nos. 1, 2 and 3	119	27.4
Nos. 1 and 3	166	38.2	Nos. 1 and 4	98	22.5
Nos. 1 and 2	160	36.8	Nos. 1, 2, 3 and 4	60	13.8
Nos. 3 and 4	160	36.8	Nos. 1, 2, 3, 4 and 5	11	2.5
Nos. 2 and 4	150	34.5	Nos. 1, 2, 3, 4, 5 and 6	3	0.7

The percentages in each of the three tables above add up to more than 100 because most families were included under two or more headings or groups of headings.

Of these 435 families 343 are known to the Health Visitors for their districts and, in addition, 753 families not registered as problem families were the subject of special surveillance by Health Visitors.

CHILDREN OF PROBLEM FAMILIES.

At the end of 1963 there were 1,814 children of problem families. Some of these children were in care or in Part III accommodation as will be seen from the following table :—

Total No. of Children.	In Care.		In Part III Accommodation.		Total in Care and Part III Accommodation.	
	For reasons of family failure.	Other reasons.	For reasons of family failure.	Other reasons.	For all reasons.	Percentage of total No. of children.
1,814	84	32	13	4	133	7.3

REHOUSING.

Thirty-five scheduled families were rehoused during the year.

SPECIAL HOME HELPS.

During 1963, problem families received the services of special home helps amounting in all to 994 hours. In addition, 3,534 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 14 each quarter.

At the end of the year 19 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 combined establishment of almoners for chest clinic work and divisional social work for problem families and the prevention of the break-up of families was increased from 17½ professional trained social workers to 18 professional trained, 2 general trained and 1 welfare assistant. The division of the work between the two services was approximately 11.5 for divisional social work and 9.5 for chest clinic work. (See work of the chest clinics, page 51.)

The social workers continued to meet regularly for group discussion at County Hall with the Care Organiser and Deputy Care Organiser, inviting to their meetings from time to time colleagues from the other closely allied county services.

TRAINING HOMES.

Six problem families were admitted to Frimhurst Recuperative Home at Frimley for training. Recuperative holidays were arranged for two families.

CHILDREN AND YOUNG PERSONS ACT, 1963.

Section 1 of this important piece of new legislation came into operation on 1st October, 1963. Under Sub-Section 1 it is laid down that "it shall be the duty of every Local Authority to make available such advice, guidance and assistance as may promote the welfare of children by diminishing the need to receive children into or keep them in care or to bring them before a juvenile court" and that "any provisions made by a Local Authority under this Sub-Section may, if the Local Authority think fit, include provision for giving assistance in kind or, in exceptional circumstances, in cash."

Sub-Section 3 of Section 1 states that where any provision which may be made by a Local Authority under Sub-Section 1 is made under any other enactment the Local Authority shall not be required to make the provision under Section 1, but shall have power to do so.

Consideration was given as to whether the implementation of this Act in Surrey would involve administrative changes, but no detailed decision had been made by the end of the year.

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.

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 agreement 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 3,255.

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 1963 including any births registered but not notified and properly belonging to the County :—

COUNTY DISTRICT AUTHORITY.	NUMBER BORN IN COUNTY DISTRICT						Number born elsewhere in Administrative County but normally resident within the County District.				Number born outside Administrative County but normally resident within the County District.				No. of Regis- tered Births (live and still).
	and normally resident therein.			and normally resident elsewhere in Surrey.			and normally resident outside County of Surrey.								
	At Home.	Private Nursing Home.	Hospital/ Maternity Home.	At Home.	Private Nursing Home.	Hospital/ Maternity Home.	At Home.	Private Nursing Home.	Hospital/ Maternity Home.	At Home.	Private Nursing Home.	Hospital/ Maternity Home.			
M.B. and Urban.															
Banstead	180	—	—	2	—	—	1	—	302	—	3	34	503		
Barnes... ..	190	—	—	—	—	—	1	—	145	—	3	218	570		
Beddington and Wallington	128	—	—	—	—	—	2	—	332	—	6	19	466		
Carshalton	124	—	502	—	—	1,985	2	—	57	—	—	20	700		
Caterham and Warlingham	234	—	—	—	—	—	—	—	300	—	3	68	585		
Chertsey	226	—	—	1	—	—	—	—	528	—	1	26	883		
Coulson and Purley	418	—	—	—	—	—	1	—	271	1	39	358	1,121		
Dorking	86	43	182	—	78	174	1	9	66	—	1	2	370		
Egham	157	—	1	2	—	—	—	—	230	1	3	80	471		
Epsom and Ewell	226	—	579	—	—	933	1	—	46	2	1	29	904		
Esher	208	—	—	1	—	155	1	—	38	—	10	130	870		
Farnham	74	—	260	1	—	4	—	—	17	—	—	74	459		
Frimley and Camberley	204	—	212	—	—	112	2	—	122	2	—	283	860		
Godalming	51	—	724	1	335	1,032	—	30	220	—	1	7	303		
Guildford	103	71	121	—	—	68	—	—	18	—	—	15	882		
Haslemere	16	—	354	2	—	1,508	2	—	240	2	—	3	155		
Kingston-upon-Thames	164	—	—	—	—	—	—	—	18	—	1	45	667		
Leatherhead	202	—	—	1	—	—	—	—	280	—	2	10	540		
Malden and Coombe	183	—	—	2	—	—	1	—	368	—	4	47	595		
Merton and Morden ...	158	—	203	—	—	501	—	—	496	1	—	31	880		
Mitcham	228	—	644	—	—	1,113	1	—	675	—	—	81	991		
Reigate	150	—	—	—	—	—	—	—	23	—	—	9	828		
Richmond	127	—	—	—	—	—	—	—	314	—	6	190	661		
Surbiton	306	—	—	3	—	—	1	—	645	1	3	46	1,018		
Sutton and Cheam ...	300	—	252	2	—	151	1	—	654	5	—	36	1,248		
Wotton and Weybridge	183	19	353	1	8	90	1	5	159	3	3	31	738		
Wimbledon	130	225	—	2	216	—	—	1,031	531	1	7	81	967		
Woking	388	—	741	1	—	764	—	—	80	—	—	38	1,272		
Rural.															
Bagshot	55	—	164	—	—	282	1	—	104	1	8	23	332		
Dorking and Horley	103	—	—	—	—	—	—	—	296	—	6	127	591		
Godstone	185	—	1	—	—	—	2	—	364	3	2	108	678		
Guildford	174	—	—	2	—	—	—	—	577	—	3	256	1,121		
Hambledon	91	—	—	2	—	—	—	—	334	—	4	16	528		
Totals	5,752	358	5,293	26	637	8,760	23	1,075	9,010	28	120	2,541	23,757		

The percentage of confinements taking place in hospitals was 70.57, in private nursing homes 4.74, and at home 24.69.

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

Year.	At Home.	In Private Nursing Home.	In Hospital.	Total Registered Births L. & S.
	+ 1,344 out-County			
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
1962	6,327	1,147	15,570	23,379
1963	5,806	1,115	16,594	23,757

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 50.8 per cent and of hospital confinements 26.4 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 eight years, the number of early discharges in the County has been as follows :—

Division.	1956	1957	1958	1959	1960	1961	1962	1963
North-Western ...	90	114	114	158	199	283	256	317
Central ...	44	57	67	97	102	119	154	160
North-Central ...	36	66	167	172	205	109	154	145
Southern ...	57	69	82	72	135	175	141	229
South-Eastern ...	27	62	59	72	158	170	179	189
Northern ...	14	17	31	38	51	44	43	63
South-Western ...	277	166	160	260	380	365	522	635
North-Eastern ...	40	49	69	88	123	141	141	156
Mid-Eastern ...	20	37	48	34	87	64	71	98
Woking ...	—	—	—	—	—	—	109	137
Totals ...	605	637	797	991	1,440	1,470	1,770	2,129

In my last report, I dealt with the difficulties which were likely to arise as a result of the increased number of births taking place each year. The number of births again increased in 1963, but it is interesting to note that while the number of hospital confinements has increased, the number of domiciliary confinements has diminished ; this has been accomplished by an increase in the number of early discharges. Yet the number of midwives, district nurse/midwives, etc., employed by the County Council in 1963 was, in full time equivalents, greater than in 1962, so that there was no need from the point of view of the available staff for any expansion of this practice which is both undesirable from the medical and obstetrical aspect and is heartily disliked by the great majority of both hospital and domiciliary midwives.

A glance at the table on page 23 makes it clear that selection of cases for hospital confinement still leaves much to be desired. Of the "high risk" high parity mothers no less than 34.3 per cent were confined at home ; while 56.6 per cent of the "safe" low parity mothers were confined in hospital. Better selection of cases for hospital confinement would undoubtedly decrease the number of emergency admissions in labour (see table on page 32) and might reduce or even obviate the need in Surrey for building new maternity units.

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

The following table shows the live births during the seven years 1956-1962 analysed by age and parity of mother and place of occurrence.

Year.	Age Group.	† Parity of Mother.												ALL.				TOTAL.
		0						1—3						4 and over.				
		N.H.S. Hosp.	Other Hosp.	At Home.	Other.	N.H.S. Hosp.	Other Hosp.	At Home.	Other.	N.H.S. Hosp.	Other Hosp.	At Home.	Other.	N.H.S. Hosp.	Other Hosp.	At Home.	Other.	
1956	Under 25 25-34 35 and over Not stated Total	3,307 3,377 442 12 7,138	163 237 32 — 432	243 257 35 2 537	71 31 2 1 105	990 3,516 2,118 5 5,629	50 424 150 — 624	528 2,300 550 7 3,385	22 46 4 — 72	7 176 212 — 395	— 16 21 — 37	11 261 231 1 504	— 1 3 10 4	4,304 7,069 1,772 17 13,162	213 677 203 — 1,093	782 2,818 816 10 4,426	93 78 9 1 181	18,862
1957	Under 25 25-34 35 and over Not stated Total	3,459 3,397 511 15 7,382	175 218 35 — 428	272 262 38 — 572	66 30 3 — 99	979 3,388 1,065 4 5,436	80 449 147 4 680	689 2,658 573 5 3,925	45 38 4 — 87	8 234 238 1 481	1 23 27 — 51	14 270 203 3 490	— — 1 — 1	4,446 7,019 1,814 20 13,299	256 690 209 4 1,159	975 3,190 814 8 4,987	111 68 8 — 187	19,632
1958	Under 25 25-34 35 and over Not stated Total	3,647 3,474 431 10 7,562	213 225 25 — 463	275 306 32 1 614	67 25 4 2 98	1,035 3,326 1,145 4 5,510	83 500 168 — 751	743 3,040 644 6 4,433	29 51 2 — 82	13 186 241 3 443	— 13 32 — 45	9 269 176 — 454	— — — — —	4,695 6,986 1,817 17 13,515	296 738 225 — 1,259	1,027 3,615 852 7 5,301	96 76 6 2 180	20,455
1959	Under 25 25-34 35 and over Not stated Total	3,622 3,362 499 12 7,495	237 222 36 — 496	265 279 26 1 571	81 28 1 — 110	1,098 3,336 1,098 7 5,539	112 467 143 1 723	783 3,201 618 4 4,606	36 60 5 — 101	8 242 255 1 506	1 22 35 — 58	10 273 199 3 485	— — — — —	4,728 6,940 1,852 20 13,540	350 711 214 2 1,277	1,058 3,753 843 8 5,662	117 88 6 — 211	20,690
1960	Under 25 25-34 35 and over Not stated Total	3,781 3,465 477 6 7,729	264 233 32 2 531	283 269 29 — 581	66 19 5 — 90	1,214 3,512 1,142 2 5,870	130 528 154 2 814	909 3,358 668 3 4,938	44 57 7 — 108	5 265 307 1 578	2 36 34 — 72	9 264 191 — 464	— 1 2 — 3	5,000 7,242 1,926 9 14,177	396 797 220 4 1,417	1,201 3,891 888 3 5,983	110 77 14 — 201	21,778
1961	Under 25 25-34 35 and over Not stated Total	4,088 3,538 489 8 8,123	294 271 45 5 615	292 256 32 4 584	81 19 2 1 103	1,211 3,568 2,175 — 5,863	158 597 175 — 930	929 3,479 644 2 5,054	46 56 2 — 104	16 289 318 — 623	1 31 36 — 68	14 268 171 — 453	1 — 2 — 3	5,315 7,395 1,891 8 14,609	453 899 256 5 1,613	1,235 4,003 847 6 6,091	128 75 6 1 210	22,523
1962	Under 25 25-34 35 and over Not stated Total	4,323 3,495 472 11 8,301	296 286 32 2 616	293 236 26 2 557	94 20 3 1 118	1,295 3,633 1,142 3 6,073	146 596 161 — 903	1,069 3,595 583 1 5,248	32 56 6 — 94	18 325 347 1 689	2 30 39 1 71	11 234 152 1 398	— 1 — — 1	5,636 7,451 1,961 15 15,063	444 912 232 2 1,590	1,373 4,065 761 4 6,203	126 77 9 1 213	23,069

† 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.

Ante-Natal and Post-Natal Clinics.

Division.	Number of Women in attendance.		Number of sessions held by				Total number of sessions in columns 3-6.
	For ante-natal ex-amination.	For post-natal ex-amination.	Medical Officers.	Midwives.	G.P.'s employed on a sessional basis.	Hospital medical staff.	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)
North-Western	661	27	60	251	62	—	373
Central	2,194	264	335	384	—	—	719
North Central	1,634	297	355	459	—	—	814
Southern	739	410	17	98	—	101	216
South-Eastern	516	18	127	255	—	—	382
Northern	1,377	183	249	307	—	—	556
South-Western	547	154	—	—	—	101	101
North-Eastern—							
Wimbledon	308	7	11	99	39	—	149
Merton & Morden	282	5	146	—	—	—	146
Mitcham	703	23	177	104	4	—	285
Mid-Eastern—							
Carshalton	359	10	95	102	111	—	308
Beddington & Wallington	128	9	51	—	—	—	51
Woking	766	171	102	439	46	—	587
Total	10,214	1,578	1,725	2,498	262	202	4,687

Ante-Natal Mothercraft and Relaxation Classes.

Division.	Number of Women who attended during the year.			Total number of attendances during the year.
	Institutional booked.	Domiciliary booked.	Total.	
North-Western	280	86	366	1,233
Central	646	231	877	2,744
North Central	913	239	1,152	4,998
Southern	298	171	469	7,664
South-Eastern	304	101	405	2,225
Northern	235	17	252	1,057
South-Western	411	13	424	1,642
North-Eastern—				
Wimbledon	144	40	184	1,299
Merton & Morden	184	26	210	1,394
Mitcham	212	19	231	1,262
Mid-Eastern—				
Carshalton	114	5	119	555
Beddington & Wallington	119	12	131	575
Woking	52	35	87	442
Total	3,912	995	4,907	27,090

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.

Educative talks and discussion groups on subjects related to pregnancy and the confinement and to parentcraft 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.

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

Year.	Number of Sessions per Month.		Number of Women attending.		Number of Attendances.	
	Medical Officers.	Midwives.	First time in the year.	All cases.	Medical Officers' sessions.	Midwives' sessions.
1949		256		9,294		38,467
1950		233		8,902		35,507
1951		220		8,197		34,831
1952		209		7,323		33,348
1953	206	45	5,748	7,538	33,521	
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
1962	190	158	7,549	9,930	22,358	19,558
1963	182	208	8,379	10,214	23,104	19,808

The number of women attending the County Council's ante-natal clinics form 43 per cent of the total births in the County. Of course, considerable numbers attend hospital ante-natal clinics and clinics run by general practitioners, and it is very desirable that as many women as possible should be encouraged to take advantage of the services which can be of great help to the expectant mother.

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 further consideration needs to be given to this part of the service and it may be that the post-natal examination which the general practitioner undertaking maternity medical services is required to give within six weeks after the confinement should be postponed until later.

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, provided by Voluntary Organisations receiving a grant from the Council while 100 were sent by the Council to other Homes, payment being made per capitum.

In addition, 58 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 1963 was 9, which gives a maternal mortality rate of 0.38 per thousand live and still births which is more than the rate of 0.28 for England and Wales. A comparison with previous years will be found under "Vital Statistics" on page 7.

Four of the deaths occurred at home and 5 in hospital.

Puerperal pyrexia.

During 1963, 310 cases of puerperal pyrexia were notified representing an attack rate of 13.05 per thousand live and still births as compared with 7.44 for England and Wales. Of these cases 32 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 5.5 in domiciliary practice and 15.7 in institutional practice (including hospitals and private nursing homes).

Infant mortality.

The infant mortality rate in the Administrative County of 17.08 compares with 20.9 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 1963—namely 16.48 (334 deaths)—is lower than the rural rate—namely 20.88 (67 deaths).

Prematurity.

The following table gives details of premature births and still births notified in the County during the year 1963 as adjusted by transferred notifications:—

Weight at birth.	PREMATURE LIVE BIRTHS.												Premature still births.	
	Born in hospital.				Born at home or in a nursing home.									
					Nursed entirely at home or in a nursing home.				Transferred to hospital on or before 28th day.					
	Total Births.	Died.			Total births.	Died.			Total births.	Died.			Born.	
		Within 24 hours of birth.	In 1 and under 7 days.	In 7 and under 28 days.		Within 24 hours of birth.	In 1 and under 7 days.	In 7 and under 28 days.		Within 24 hours of birth.	In 1 and under 7 days.	In 7 and under 28 days.		
(a) 2 lb. 3 oz. or less ...	39	30	7	—	—	—	—	—	—	—	—	—	27	3
(b) Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ...	100	33	9	2	—	—	—	—	—	—	—	—	48	3
(c) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. (1,500-2,000 grms.) ...	206	29	16	5	7	—	1	—	11	—	1	—	36	3
(d) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. (2,000-2,250 grms.) ...	249	7	2	1	30	—	—	—	6	—	—	—	17	—
(e) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. (2,250-2,500 grms.) ...	469	8	7	1	90	2	1	—	13	1	1	1	29	—
Totals ...	1,063	107	41	9	127	2	2	—	30	1	2	1	157	9

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 ...	23,484	22,264	1,220
Deaths among live births in the first month of life ...	282	118	164
Still births ...	273	107	166

* The Ministry of Health's definition of a premature birth is one when the infant at birth weighs 5½ lbs. or less.

It will be seen that the 22,264 non-premature live births produced 118 neo-natal deaths and the 1,220 premature live births produced 164 neo-natal deaths. In addition more than half the still births are associated with prematurity. Unfortunately the figures for the last eleven years give no indication of any decrease in the incidence of premature births.

Ophthalmia Neonatorum.

In 1963 midwives sought medical aid for suspected cases of ophthalmia neonatorum in respect of 68 babies and one case was notified by a medical practitioner as suffering from ophthalmia neonatorum.

The case rate (i.e., the number of notified cases per thousand live births) was 0.04.

The case notified by the medical practitioner occurred in hospital and was treated there.

Infant Welfare Centres.

The County Council maintained 197 infant welfare centres in the year. Additional centres were started at (i) Brookwood Memorial Hall; (ii) S.C.C. Health Clinic, Stafford Road, Caterham; (iii) Village Hall, Compton; and the centre at Pelham House, Harestone Valley Road, Caterham, was closed during the year.

The following table shows the attendance at the centres for the year 1963:—

Division.	Number of children who attended during the year.			No. of sessions held by				Total number of sessions in columns (4)-(7)	Number of children referred elsewhere	Number of children on "at risk" register at end of year.
	Born in 1963.	Born in 1962.	Born in 1958-61.	Medical Officers.	Health Visitors.	G.P.'s employed on a sessional basis.	Hospital medical staff.			
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)
North-Western ...	2,757	1,619	1,748	692	1,231	335	—	2,258	153	644
Central ...	2,968	3,029	5,249	1,871	—	—	—	1,871	201	1,431
North-Central ...	2,664	2,350	3,385	1,054	68	139	—	1,261	58	1,379
Southern ...	1,643	1,762	2,316	1,122	—	—	—	1,122	67	1,181
South-Eastern ...	1,510	1,463	2,212	781	173	—	—	954	236	1,612
Northern ...	1,040	861	640	511	—	—	—	511	22	712
South-Western ...	2,570	2,420	3,347	1,291	22	2	—	1,315	226	824
North-Eastern—										
Wimbledon ...	974	1,011	1,405	354	—	50	—	404	83	446
Merton & Morden ...	620	689	1,146	462	—	—	—	462	15	711
Mitcham ...	931	907	767	227	—	178	—	405	16	601
Mid-Eastern—										
Carshalton ...	605	675	1,386	216	—	206	—	422	98	691
Beddington & Wallington ...	410	383	584	252	—	—	—	252	29	337
Woking ...	1,081	1,030	1,409	469	—	—	—	469	38	277
Total ...	19,773	18,199	25,594	9,302	1,494	910	—	11,706	1,242	10,846

By contrast with the rather poor proportion of mothers attending the ante-natal clinics, it will be noted that the number of children attending the centres in 1963 and who were born in that year formed 84.19 per cent of the total live births in the year.

Number of premises in use at end of year for ante and post natal clinics, ante natal, mothercraft and relaxation classes, child welfare centres:

Division.	Purpose built.	Adapted.	Occupied on a sessional basis.	Total.
	(1)	(2)	(3)	(4)
North-Western ...	2	5	19	26
Central ...	5	2	18	25
North-Central ...	4	7	7	18
Southern ...	6	2	22	30
South-Eastern ...	3	1	16	20
Northern ...	3	2	2	7
South-Western ...	1	6	35	42
North-Eastern—				
Wimbledon ...	2	1	3	6
Merton & Morden ...	3	—	1	4
Mitcham ...	4	—	1	5
Mid-Eastern—				
Carshalton ...	3	1	—	4
Beddington & Wallington ...	—	—	7	7
Woking ...	1	2	10	13
Total ...	37	29	141	207

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 eleven years, together with the number of registered live births is as follows:—

Year.	Registered live births.	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 Welfare centres (%).
1953	18,187	49,348	367,333	75.31
1954	18,193	49,370	374,329	76.58
1955	18,305	48,717	374,459	78.02
1956	18,794	49,905	382,002	77.07
1957	19,627	52,110	402,309	77.37
1958	20,398	52,794	400,489	79.37
1959	20,725	55,211	409,644	81.23
1960	21,675	58,722	422,467	85.50
1961	22,423	62,697	447,525	87.18
1962	23,054	63,026	441,549	82.71
1963	23,484	63,566	433,285	84.19

The holding of parentcraft 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 47 children under the age of five years and 11 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 1963 :—

National Dried Milk.			Cod Liver Oil.		A. & D. Tablets.		Orange Juice.	
Free.	2/4	4/-	Free	1/-	Free.	6d.	Free.	1/6
2,691	119,207	9,153	1,226	23,798	207	40,103	5,947	395,115

Non-coupon issues to Hospitals and Nurseries :—

	National Dried Milk.	Cod Liver Oil	A. & D. Tablets	Orange Juice.
Hospitals	1,273	—	—	3,138
Nurseries	30	698	—	1,540

Audiological Service.

This service continued to expand during the year and the report of the County Audiologist, Dr. E. A. Beet, is given on page 83.

Children "At Risk."

The number of children on the "at risk" register increased from 4,244 in 1962 to 10,846 in 1963.

This large increase is no doubt due to improved methods of notification and to the constant careful watch kept by the medical and health visiting staff for infants in this category.

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

Division.	No. of children "at risk" referred for screening during 1963.		No. of children tested by Health Visitors.		No. of new cases referred to Audiology Clinic from all sources.		No. carried over as not fully assessed by end of previous year.		No. found to have normal hearing.		No. found to have remediable hearing loss.		No. found to have impaired hearing necessitating hearing aid and auditory training.		No. not fully assessed by end of year.	
	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5
North-Western	593	—	733	10	39	21	4	6	30	11	2	2	1	3	10	11
Central	1,271	—	740	—	30	40	4	6	23	30	—	2	—	—	11	14
North-Central	704	—	369	286	23	35	—	2	20	30	—	5	1	2	2	—
Southern	665	—	409	—	36	12	5	1	29	8	—	4	1	—	11	1
South-Eastern	454	—	329	—	21	29	2	3	6	19	1	—	—	—	7	5
Northern	246	7	164	7	9	9	—	3	6	10	—	—	1	1	3	—
South-Western	817	7	445	7	21	23	8	8	21	22	—	—	—	—	8	9
North-Eastern—Merton/Morden	281	216	733	132	5	11	—	4	5	12	—	—	—	—	—	2
Mitcham	178	27	121	27	5	7	—	2	2	5	—	2	1	1	2	1
Wimbledon	83	—	425	29	2	14	4	3	4	13	—	—	1	—	1	4
Mid-Eastern—Carshalton	216	25	543	24	24	17	—	—	13	10	—	1	1	1	10	6
Beddington/Wallington	118	—	414	6	1	2	—	—	1	1	—	—	—	1	—	—
Woking	235	20	92	3	10	9	2	—	10	5	1	2	—	1	1	1
Total	5,861	302	5,577	531	226	229	29	38	170	176	4	18	7	10	66	54

DENTAL CARE OF MOTHERS AND YOUNG CHILDREN.

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.

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 9,870. The number of new patients attending during the year was 2,962 of which approximately 60 per cent were pre-school children. Dentures for mothers were provided through the County Dental Laboratory and to a lesser extent by outside contractors.

Individual and group talks on dental health education were given by members of the dental staff. Health visitors have generally devoted one session in mothercraft classes to dental health in which the importance is stressed of an adequate and properly balanced diet to promote the foundation of sound teeth. Considerable use was made of films, film strips and leaflets dealing with oral hygiene and diet.

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

(a) Numbers provided with dental care.

	Number of persons examined during the year.	Number of persons who commenced treatment during the year.	Number of courses of treatment completed during the year.
Expectant and Nursing Mothers	997	784	454
Children under 5 and not eligible for School Dental Service	3,592	2,013	1,334

(b) Forms of treatment provided.

	Sealings and gum treatment.	Fillings.	Silver nitrate treatment.	Crowns or Inlays.	Extractions.	General anaesthetics.	Dentures provided.		Radio-graphs.
							Full upper or lower.	Partial upper or lower.	
Expectant and Nursing Mothers	604	1,552	17	23	858	97	83	123	69
Children under 5	11	3,722	1,533	—	1,157	525	—	—	78

DOMICILIARY MIDWIFERY AND HOME NURSING.

During 1963 the number of cases attended by home nurses was greater than in the previous year and the total number of visits paid to them also showed an increase. There was a decrease in the demand for the services of the domiciliary midwives for confinements in the home and an increase 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 and midwives.

(a) MIDWIVES BOOKED CASES TRANSFERRED TO HOSPITAL DURING LABOUR.

During 1963, there were 683 cases booked by the domiciliary midwives which were transferred to hospital during pregnancy or labour representing 10.5 per cent of all domiciliary booked cases. The following table analyses the reasons for these emergency admissions :—

Reason.	Total.	Pregnancies.		
		1st.	2nd and 3rd.	4th and over.
(1) IN LABOUR.				
Ante-partum haemorrhage	44	8	24	12
Mal-presentation	47	15	21	11
Early rupture of membranes	14	3	7	4
Foetal distress	20	7	11	2
Inertia	87	36	38	13
Toxaemia	5	2	2	1
Post-partum haemorrhage	27	6	18	3
Prematurity	24	2	15	7
Retained placenta	23	7	13	3
Breech	19	4	12	3
Stillbirths	4	—	3	1
Twins	4	1	3	—
Social grounds	5	2	3	—
	323	93	170	60
(2) IN PREGNANCY.				
Ante-partum haemorrhage	36	6	22	8
Mal-presentation	54	19	27	8
Anaemia	14	3	7	4
Post-maturity	102	29	63	10
Rhesus factor	14	—	12	2
Toxaemia	106	56	30	20
Medical grounds	13	2	6	5
Social grounds	6	1	1	4
Twins	15	1	13	1
	360	117	181	62

(b) ANALYSIS OF NURSING CASES.

(i) Principal Medical and Surgical Conditions.

Cases.	Aged 0-15.	Aged 15-40.	Aged 40-60.	Aged 60+	Total All ages.
Diseases of the heart	5	19	235	2,317	2,576
Circulatory	3	219	363	1,724	2,309
Malignant neoplasm—					
Chest	—	—	125	234	359
Abdominal	—	—	127	406	533
Other sites	—	—	265	421	686
Vascular lesions of nervous system	—	—	380	1,631	2,011
Respiratory diseases	62	87	255	1,042	1,446
Pulmonary tuberculosis	1	33	37	13	84
Non-pulmonary tuberculosis	3	64	51	18	136
Influenza	3	12	17	37	69
Rheumatic diseases	4	12	136	915	1,067
Cystitis and pyelitis	3	27	24	83	137
Accidents	32	21	33	103	189
Fractures	1	8	22	223	254
	117	502	2,070	9,167	11,856

(ii) Other.

General care of the aged	2,731
Uterine	698
Maternal complications	196
Infections	855
Gastric ulcer	174
Diabetes :	
Insulin	397
Insulin plus treatment	173
Constipation	1,260
Diagnostic preparations	820
Bones and joints	304
Gangrene	57
Post-operative dressings	923
Minor ailments	343
Mental disorders	99
Boils and carbuncles	408
Diverticulitis	54
Skin infection	103
Eye infection	78
Otitis media	119
Miscellaneous	541
	10,333

(c) 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 38 midwives to courses at Newcastle, Leeds, Bangor, Bristol, London, Birmingham, Sheffield, Exeter, Cardiff. 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.

(d) 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 27 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. Nine students sponsored by Croydon 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 307 full-time and 73 part-time nurses and midwives available for duty.

The work of the district nurses during the year 1963 was as follows:—

Division.	Medical.	Surgical.	Infectious Diseases.	Tuberculosis.	Maternal complications.	Others.	Totals.	Patients included in (2)-(7) who were 65 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 had more than 24 visits during the year.
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)
Number of cases attended by Home Nurses during the year:—										
North-Western ...	1,811	237	—	15	10	3	2,076	1,379	64	435
Central ...	3,240	374	1	26	14	5	3,660	2,551	48	1,013
North-Central ...	2,785	479	1	35	25	6	3,331	3,065	51	938
Southern ...	1,729	321	—	16	7	9	2,082	1,372	93	503
South-Eastern ...	1,216	150	2	18	7	1	1,394	969	27	331
Northern ...	1,712	135	—	6	6	1	1,860	1,249	32	510
South-Western ...	2,379	366	33	4	71	45	2,898	1,742	85	1,005
North-Eastern—										
Merton & Morden	659	111	—	14	10	2	796	726	4	330
Mitcham	801	144	—	15	1	—	961	630	13	287
Wimbledon	867	83	—	16	5	1	972	609	10	265
Mid-Eastern—										
Beddington & Wallington	587	64	—	8	—	—	659	430	14	208
Carshalton	403	125	—	3	—	—	531	337	3	215
Woking	849	93	—	8	10	9	969	623	20	194
	19,038	2,682	37	184	166	82	22,189	15,682	464	6,234
Number of visits paid by Home Nurses during the year:—										
North-Western ...	35,644	6,271	—	651	65	425	43,056	32,962	354	29,540
Central ...	94,287	13,389	17	716	89	11	108,509	82,425	270	85,633
North-Central ...	77,118	13,740	26	1,241	157	160	92,442	67,511	348	70,942
Southern ...	40,685	6,065	—	506	37	1,266	48,559	37,095	508	34,929
South-Eastern ...	26,442	3,485	28	558	33	18	30,564	23,228	104	22,946
Northern ...	46,936	5,600	—	277	28	153	52,994	43,170	275	40,504
South-Western ...	68,735	11,584	317	336	248	3,809	85,029	61,438	565	56,882
North-Eastern—										
Merton & Morden	28,554	3,483	—	494	54	469	33,054	24,657	55	26,815
Mitcham	21,266	5,129	—	530	7	6	26,938	20,026	233	20,269
Wimbledon	23,899	3,229	—	815	32	20	27,995	21,270	51	23,059
Mid-Eastern—										
Beddington & Wallington	16,030	1,558	—	302	—	—	17,890	12,488	68	14,851
Carshalton	16,432	3,896	—	320	—	—	20,648	14,530	6	17,120
Woking	17,667	2,721	—	269	80	9	20,746	14,036	87	15,259
	513,695	80,150	388	7,015	830	6,346	608,424	454,836	2,924	458,749

Attention is again drawn to the high proportion of the nurses' time which is spent with the over 65 age group. In 1963 70.7 per cent of the patients and 74.8 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 1963 was 628.

DELIVERIES ATTENDED BY DOMICILIARY MIDWIVES DURING 1963.

Division.	Number of domiciliary confinements attended by midwives under N.H.S. arrangements.			Number of cases delivered in hospitals and other institutions but discharged and attended by domiciliary midwives before 10th day.
	Doctor not booked. (1)	Doctor booked. (2)	Total. (3)	
North-Western	7	870	877	317
Central	8	951	959	160
North-Central	7	861	868	145
Southern	7	512	519	229
South-Eastern	—	653	653	189
Northern	4	309	313	63
South-Western	12	428	440	635
North-Eastern—				
Merton & Morden	11	151	162	43
Mitcham	14	218	232	84
Wimbledon	—	123	123	29
Mid-Eastern—				
Beddington & Wallington ...	2	127	129	41
Carshalton	12	107	119	57
Woking	5	428	433	137
Total	89	5,738	5,827	2,129

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 Practitioner had arranged to provide the patient with maternity medical services under the National Health Service ... 840

(b) Others 61

(ii) For cases in Institutions 622

NOTIFICATIONS FROM MIDWIVES.

The following notifications were received from midwives :—

Sending for medical aid	1,523
Stillbirths	64
Laying out dead body	8
Liability to be a source of infection (including pyrexia)	187
Death of mother or baby	26
	<u>1,808</u>

SPECIAL INVESTIGATIONS.

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

Sending for medical aid (all were concerned with condition of babies' eyes) ...	63
Stillbirths	64
Liability to be source of infection (including pyrexia)	187
Death of mother or baby	26
Total	<u>340</u>

Associations have given

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chief over their patients, that an elderly person visit. The co-operation

whether living alone, many patients come as a "buddy" and are only in the old person's card and blood pressure are taken every year, the patient is given Snellen's test card and an appetite and diet card. Vitamin B containing (complex) and Complamin are given. Many free samples are available. We issue a booklet. We feel it is not reasonable to expect the needs of the older person. The talks are being given

ask the general practitioner, senior physiotherapist,

ercises are very noticeable in a few weeks, and they come back, but after only a few days have followed the advice they have come to try it out among the patients help in their own homes.

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$$\begin{array}{r} 346 \\ 1 \\ 6 \\ \hline 353 \end{array}$$

(b) No. of home visits :—

First visit	240
With doctor... ..	27
Re-visits to patients	1,219
Visits to relatives	33
Miscellaneous	61
Total	1,580

(c) Cases dealt with by admission to :—

Hospital	71
Nursing Home	12
Welfare Home	14
Hospital or Nursing Home to give relatives a rest	6
	103

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 to General Health Visitors.
			General Practitioners.	Hospital Almoners.	Local Authority.	Other sources.	
Kingston	300	1,144	871	167	56	50	—
Guildford	90	389	93	240	6	50	—
St. Helier	347	499	460	33	1	5	34
Woking and Chertsey	110	462	358	54	10	40	—
Farnham (Surrey cases only)	73	265	187	27	14	37	—
Redhill (all cases)	218	1,011	670	251	90	—	44
Total	1,138	3,770	2,639	772	177	182	78

TYPES OF VISIT.

Geriatric Health Visitor.	Home Visits.					
	First visits.		Revisits to Patients.	Visits to Relatives.	Miscellaneous.	Total.
	H.V.	H.V. and Dr.				
Kingston	270	—	1,051	157	121	1,599
Guildford	399	—	1,276	59	493	2,227
St. Helier	503	55	1,057	16	151	1,782
Woking and Chertsey	232	—	329	56	49	666
Farnham (Surrey cases only)	103	—	202	29	24	358
Redhill (Surrey cases only)	210	—	1,970	83	115	2,378
Total	1,717	55	5,885	400	953	9,010

CASES DEALT WITH WHO WERE :—

Geriatric Unit.	Admitted to Hospital.	Admitted to Nursing Home.	Admitted to Welfare Home or referred to Welfare Officer.	Hospital to give relatives a rest.	Day Hospital.
Kingston	549	65	55	127	—
Guildford	170	10	10	22	61
St. Helier	605	3	7	—	—
Woking and Chertsey ...	98	75	8	71	24
Farnham (Surrey cases only)	56	2	8	16	—
Redhill	545	—	33	89	—
Total	2,023	155	121	325	85

HEALTH VISITING.

In my report for 1961 mention was made of the various proposals which had been approved by the Council, the primary purpose of which was to enable health visitors to devote more time to home visiting and teaching. A review of the results in 1963—the second full year of the revised arrangements—shows that the situation in this respect is much improved. At the end of the year the total establishment of health visitors was 244.

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:—

Division.	Field establishment at 31st December, 1963		Live births 1963		Case load 0-5 years.	Average No. per H.V.	Cases visited by Health Visitors.				Total No. of children visited.
	D.H.V.	H.V.	Registered and adjusted.	No. of 1963 birth cards.			Expectant mothers.	Children under 1 year of age.	Children age 1 and under 2 years.	Children age 2 and under 5 years.	
North-Western ...	1	27	3,469	3,472	15,598	577	801	3,524	3,321	7,685	14,530
Central ...	1	24	3,261	2,906	14,002	583	1,596	3,106	3,167	7,976	14,249
North-Central ...	1	24	3,127	2,862	12,784	533	924	2,893	2,713	7,631	13,237
Southern ...	0.5	20	2,449	2,459	10,689	534	714	2,333	2,654	7,167	12,154
South-Eastern ...	1	15	1,761	1,734	8,211	547	767	1,679	1,776	5,081	8,536
Northern...	1	10	1,223	1,080	4,851	485	498	1,150	1,111	2,524	4,785
South-Western ...	1	25	2,977	2,877	12,558	502	1,005	3,084	3,069	8,160	14,313
North-Eastern—											
Merton and Morden ...		9	868	820	3,860	429	787	892	925	2,711	4,528
Mitcham ...		9	982	945	4,009	445	727	935	1,040	3,142	5,117
Wimbledon ...		7	951	870	3,351	479	640	990	932	2,155	4,077
Mid-Eastern—											
Beddington and Wallington ...	1	4	462	458	1,973	493	336	456	452	1,362	2,270
Carshalton ...		8	697	659	3,251	406	379	686	663	1,746	3,095
Woking ...	—	11	1,257	1,222	5,583	508	345	1,333	1,382	3,245	5,960
Relief Staff ...	—	4	—	—	—	—	—	—	—	—	—
Total 1963 ...	8.5	197	23,484	22,364	100,720	511	10,117	23,061	23,205	60,585	106,851

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 83.

Their other duties include work in connection with Problem families, Health education, Visiting the elderly in their homes and 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 1955 for training candidates to undertake service in the County as health visitors was amended in 1963 to provide a course lasting one academic year (in practice about nine months) commencing with the course starting in September, 1963. This extension was necessitated by reason of the widening scope of health visiting and the need for more lectures to be fitted into the timetable thus leaving the student more time for individual work in small groups.

Twenty-three students were selected to take the course; of these 19 are students sponsored by the Council, 1 sponsored by the Berkshire County Council and 3 are independent students from the Commonwealth.

Training of Hospital Student Nurses.

As in previous years many of the hospitals have again 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 and there has been an increasing number of requests from the psychiatric hospitals.

During 1963, 12 lectures were given by the Chief Nursing Officer, 38 by senior health visitors, 13 by superintendent district nurses and 4 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 and during the year the number of student hospital nurses who spent time with nurses and health visitors was 950. 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.

The following table gives details of immunisation against diphtheria carried out during 1963.

District.	Age	A. Number of children who completed a full course of primary immunisation during the year ended 31st December, 1963.				B. Number of children who received a secondary (reinforcing) injection (i.e. subsequently to primary immunisation at an earlier age) during the year ended 31st December, 1963.			
		0—1	1—4	5—14	Total	0—1	1—4	5—14	Total
M.B. and Urban.									
Banstead		203	246	21	470	—	197	316	513
Barnes		184	246	1	431	—	267	326	593
Beddington and Wallington		183	282	30	495	—	33	630	663
Carshalton		194	363	92	649	—	195	1,276	1,471
Caterham and Warlingham		237	310	18	565	—	11	647	658
Chertsey		239	565	49	853	6	154	656	816
Coulsdon and Purley		433	557	32	1,022	—	63	1,478	1,541
Dorking		96	181	25	302	—	78	317	395
Egham		133	203	27	363	—	32	213	245
Epsom and Ewell		347	392	18	757	—	470	765	1,235
Esher		327	359	29	715	14	425	912	1,351
Farnham		148	368	8	524	—	120	62	182
Frimley and Camberley		288	449	33	770	—	164	570	734
Godalming		116	155	41	312	—	120	110	230
Guildford		132	444	56	632	—	59	383	442
Haslemere		86	103	28	217	—	37	295	332
Kingston-upon-Thames		261	315	24	600	—	232	520	752
Leatherhead		202	254	13	469	—	164	474	638
Malden and Coombe		265	258	17	540	6	339	481	826
Merton and Morden		295	427	32	754	—	282	1,185	1,467
Mitcham		340	562	68	970	—	516	829	1,345
Reigate		316	362	3	681	—	139	579	718
Richmond		223	298	14	535	—	421	390	811
Surbiton		422	420	5	847	—	278	673	951
Sutton and Cheam		478	519	47	1,044	—	534	611	1,145
Walton and Weybridge		288	432	41	761	5	53	348	406
Wimbledon		359	388	30	777	—	281	660	941
Woking		413	555	43	1,011	—	183	719	902
Rural.									
Bagshot		121	191	5	317	—	19	123	142
Dorking and Horley		89	199	11	299	—	60	711	771
Godstone		146	415	137	698	—	22	775	797
Guildford		260	536	67	863	3	201	859	1,063
Hambleton		136	376	254	766	2	130	490	622
Total 1963		7,960	11,730	1,319	21,009	36	6,279	19,383	25,698

There were no cases of diphtheria in children notified during the year.

Smallpox Vaccination.

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

Districts.	Age	Vaccinated.					Re-Vaccinated.						
		—1.	1.	2-4.	5-14.	15+.	Total.	—1.	1.	2-4.	5-14.	15+.	Total.
M.B. and Urban.													
Banstead	48	60	5	5	1	119	—	—	—	6	3	9	
Barnes	6	27	13	5	—	51	—	—	—	—	4	4	
Beddington and Wallington	34	21	5	7	5	72	—	—	1	7	11	19	
Carshalton	118	64	3	23	1	209	—	—	—	10	2	12	
Caterham and Warlingham	90	40	6	7	4	147	—	—	2	14	16	32	
Chertsey	133	111	20	20	10	294	—	—	4	19	10	33	
Coulsdon and Purley ...	275	78	13	16	18	400	—	—	6	23	39	68	
Dorking	29	21	3	1	2	56	—	—	—	—	—	—	
Egham	11	25	13	7	4	60	—	1	4	8	6	19	
Epsom and Ewell ...	61	144	7	14	3	229	—	—	1	14	9	24	
Esher... ..	68	111	10	4	1	194	—	2	2	10	—	14	
Farnham	49	46	4	2	1	102	—	—	—	—	—	—	
Frimley and Camberley ...	93	102	19	8	2	224	—	—	9	18	4	31	
Godalming	1	58	5	4	2	70	—	—	1	5	1	7	
Guildford	87	87	11	9	7	201	—	—	—	18	5	23	
Haslemere	19	47	11	3	3	83	—	—	1	11	2	14	
Kingston-upon-Thames ...	11	80	16	11	5	123	—	—	—	7	46	53	
Leatherhead... ..	43	53	20	6	6	128	—	—	2	16	2	20	
Malden and Coombe ...	44	34	3	16	9	106	—	—	2	8	17	27	
Merton and Morden ...	81	101	2	12	8	204	—	1	10	22	49	82	
Mitcham	90	130	6	8	10	244	—	—	6	13	27	46	
Reigate	76	58	7	15	—	156	—	—	5	46	—	51	
Richmond	43	23	20	5	1	92	—	—	4	11	16	31	
Surbiton	75	64	7	3	10	159	—	—	3	13	11	27	
Sutton and Cheam ...	63	171	17	7	5	263	—	—	7	14	4	25	
Walton and Weybridge ...	63	49	23	9	2	146	—	—	2	15	17	34	
Wimbledon	50	90	15	5	4	164	—	—	2	9	22	33	
Woking	73	133	33	10	5	254	—	—	12	20	18	50	
Rural.													
Bagshot	30	22	1	9	—	62	—	—	1	8	—	9	
Dorking and Horley ...	68	45	10	15	1	139	—	—	—	14	2	16	
Godstone	104	30	15	13	1	163	—	—	6	135	35	176	
Guildford	60	153	47	34	27	321	—	—	2	42	43	87	
Hambledon	26	109	26	11	8	180	—	—	—	34	19	53	
Total 1963	2,122	2,387	416	324	166	5,415	—	4	95	590	440	1,129	
Total 1962	12,107	3,696	3,654	11,224	5,272	35,953	4	28	996	13,540	12,248	26,816	

The drop in smallpox vaccinations in 1963 is due to the postponement of vaccination in many cases until infants are in their second year of life and to the substantial increase in vaccinations in 1962 because of the smallpox scare in that year.

There were no cases specially reported upon during the year.

Whooping Cough Immunisation.

The following table shows the number of children immunised during the year 1963. In interpreting these figures it should be borne in mind that many children are inoculated with a combined diphtheria-pertussis prophylactic.

District.	No. of children who completed a primary course of inoculation during 1963.	
	0-4 years.	5-14 years.
M.B. and Urban.		
Banstead	434	—
Barnes	424	2
Beddington and Wallington... ..	465	12
Carshalton	549	7
Caterham and Warlingham	512	3
Chertsey	794	8
Coulsdon and Purley... ..	979	7
Dorking... ..	299	11
Egham	334	18
Epsom and Ewell	746	5
Esher	700	25
Farnham	433	22
Frimley and Camberley	565	22
Godalming	273	—
Guildford	559	3
Haslemere	187	7
Kingston-upon-Thames	570	2
Leatherhead	447	7
Malden and Coombe	517	5
Merton and Morden	720	6
Mitcham	889	7
Reigate	673	1
Richmond	511	3
Surbiton	847	5
Sutton and Cheam	991	2
Walton and Weybridge	717	25
Wimbledon	739	8
Woking	962	2
Rural.		
Bagshot... ..	310	1
Dorking and Horley	283	3
Godstone	542	12
Guildford	788	13
Hambleton	487	3
Total 1963	19,146	257
Total 1962	18,192	375

Yellow Fever Vaccination.

At the yellow fever vaccination centre at the Grange Road Clinic, Kingston-upon-Thames, 826 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, technical 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 Vaccination.	Consents.	Percentage of consents.	Absent.	Mantoux +ve.	Percentage +ve.	Absent from B.C.G.	Vaccinated.	Percentage of age group who were vaccinated.
North-Western	3,348	2,426	72.5	321	138	6.6	82	1,885	56.2
Central	2,333	1,777	68	53	45	1.9	15	1,664	64
North-Central	3,300	2,785	84.4	107	111	4	149	2,418	73
Southern	2,347	1,687	71.9	163	130	8	—	1,502	59.6
South-Eastern	1,397	1,048	75	34	43	4.2	1	963	68.9
Northern	603	455	75.5	—	25	5.5	—	430	71.3
South-Western	3,306	2,800	82.9	129	114	4.6	67	2,490	74.4
North-Eastern—									
Merton and Morden	878	755	86	55	35	5	39	626	71.3
Mitcham	733	589	80.4	20	47	8.3	16	506	69
Wimbledon	874	767	87.8	12	36	4.8	3	716	81.9
Mid-Eastern—									
Beddington and Wallington	456	332	72.1	24	9	2.7	9	290	63.6
Carshalton	686	535	78	14	11	2.1	5	505	76.5
Woking	1,025	705	68.8	94	45	6.9	—	566	55.2
Total	21,286	16,661	78.2	1,026	789	5.1	386	14,389	67.6

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

No. skin tested	106
No. found positive	27
No. found negative	79
No. vaccinated	78

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 20,400 children under 15 years of age completed a primary course of three injections with either single or combined vaccine and 13,499 children in the same age group received a reinforcing dose.

Poliomyelitis Vaccination.

The following table shows the number of persons completing primary immunisation in period 1st January to 31st December, 1963:—

PRIMARY VACCINATION.

	Number of Persons who have received	
	Second injection of Salk Vaccine or third injection of quadruple vaccine.	Third dose of Oral Vaccine.
Children born 1963	210	2,459
Children born 1962	383	12,785
Children born 1961	97	2,440
Children and Young Persons born 1943-1960	89	2,481
Young Persons born 1933-1942	75	1,229
Others	69	1,921
Total	923	23,315

REINFORCING DOSES.

No. of persons given third injections of Salk vaccine or fourth injections of quadruple vaccine	1,168
No. of persons given fourth injections of Salk vaccine or fifth injections of quadruple vaccine	384
2 Salk doses	2,850
2 Salk doses plus	19,969
2 Oral doses	
3 Oral doses	
3 Salk doses	
No. of persons given a reinforcing dose of Oral vaccine after	

PORT HEALTH UNIT, GATWICK AIRPORT.

The Unit consists of a full-time Medical Officer, three full-time Medical Receptionists and a panel of part-time General Practitioners, and carries out the duties of (a) Port Health ; (b) Medical inspection of Commonwealth Immigrants under the Commonwealth Immigrants' Act, 1962 ; and (c) Medical inspection of aliens under the Aliens' Order, 1953.

During the year ending December 31st, 1963, 256 immigrants were medically examined under the Commonwealth Immigrants' Act, and of these 245 were certified as medically fit, ten as likely to require major medical treatment and one as suffering from mental disorder.

Under the Aliens Order, 1953, a total of 513 aliens were examined of whom 509 were passed medically fit and four were classified as likely to require medical treatment.

During the same period 102 emergencies and casualties were dealt with by the Port Health Staff and 85 smallpox vaccinations were carried out.

The Port Health Unit at Gatwick is being extended and it is expected that the enlarged Unit will be available for use in October, 1964. Plans for the full time staffing of this unit providing for a 24-hour service are under review.

AMBULANCE SERVICE.

Organisation and Administration.

There were no fundamental changes affecting the organisation and administration of the service during the year.

Operational Strength.

The operational fleet of vehicles was increased by the addition of five ambulances and six sitting case vehicles.

The maximum operational fleet available by the end of the year was as follows :—

				<i>Sitting Case</i>	
				<i>Ambulances.</i>	<i>Vehicles.</i>
Direct Service ...	...	...	...	66	47
S.J.A.B. Agency ...	...	...	...	15	8
B.R.C.S. Agency ...	...	...	...	2	—
Total ...	...	...	...	83	55

In addition the above services are supplemented by :—

- (a) 300 members of the Hospital Car Service, who use their own private cars for the transport of patients.
- (b) 7 St. John Ambulance Brigade and 3 British Red Cross Society supplementary Ambulance Stations which are manned by volunteers and provide a service mainly at nights and weekends.

The direct service maintains 17 ambulances and 13 sitting case vehicles as a reserve (being used to maintain the strength when operational vehicles are withdrawn for servicing and repair). The St. John Ambulance Brigade and British Red Cross Society maintain their own reserve vehicles.

PERSONNEL.

The establishment of operational personnel was increased by 23 driver/attendants to man the additional vehicles.

PREMISES.

The temporary Ambulance Station at Nursery Road, Wimbledon, was in operation from the 4th February, 1963. Work on the Ambulance Station at Gatwick was near completion by the end of the year and the station became operational in March, 1964. Work had also commenced on similar projects at South Godstone and Epsom and plans are in hand for the replacement of the present ambulance station at Surbiton and to provide a temporary Central Control Station at Walton Lodge, Banstead. Some difficulty is being experienced in finding a suitable site for an Ambulance Station to replace the inadequate Sub-Station at Warlingham.

Voluntary Organisations.

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

The new Ambulance Station and Headquarters of the St. John Ambulance Brigade at Farnham came into operation on the 8th June, 1963.

Gatwick Airport.

The number of aircraft using the Airport continues to increase, but happily the number of times the Ambulances were required to take "Full Emergency" action decreased from 32 standby attendances in 1962 to 15 in 1963.

Work of the Service.

The number of patients and the mileage run shows a big increase for this year. There was an increase of 40,871 patients carried and 302,449 miles run over the 1962 totals. Most of this increase is shown in 1,021 accident patients and 37,846 out-patients carried.

Miscellaneous.

In accordance with the new regulations made by the Minister of Transport allowing ambulances to use sirens which came into effect on the 1st November, 1962, all direct service and agency service ambulances have been so fitted.

Safe Driving Competition Awards.

On the 9th July, 1963, the Chairman of the Council presented safe driving awards to successful entrants in the 1962 Competition. 320 drivers were entered for the Competition organised by the Royal Society for the Prevention of Accidents. 62 were disqualified and 59 were ineligible because of sickness, change of duties, etc. 199 were successful as follows:—

22	11-14 years oak leaf bars to ten-year medal.
7	10-year medals.
45	6-9-year bars to five-year medal.
11	5-year medals.
114	Diplomas (1-4 years).

Training.

The training of new recruits to the service and refresher courses for others continued at the Training School. During the year 34 recruits attended and 72 men took the refresher training.

Each person attending the school pays a visit to both London and Gatwick Airports to practise rescue procedure from aircraft under the direction of Airport Fire Officers.

Officers of the Service have visited schools, clinics and factories to give instruction in first aid, including mouth-to-mouth resuscitation and over 1,200 people have received this instruction.

Ambulance Efficiency Competition.

The finals of the Annual Efficiency Competition were held at the Ambulance Training School on the 12th June, 1963. The result was as follows:—

A. L. Roberts Shield (First Aid) ...	Purley Sub-Station.
Hooper Shield (Driving) ...	St. Helier Main Station.

Surrey County Show.

The Service provided a set piece for the County Show. A radio controlled map was used with model vehicles. Visitors could also speak to any vehicle on the road.

Civil Defence—Ambulance and First Aid Section.

Progress has been made in carrying out the new Standard Training and during the year 436 volunteers passed the test. 2,620 classes were held during the year with an average attendance of over 10 volunteers attending each session. During the summer months 38 exercises were held by the Section, mainly convoy and deployment, to other County Councils or County Boroughs.

An Instructors' Course was held when eight further instructors became qualified to give instruction in Civil Defence subjects. Eight Ambulance Service Officers attended the central schools at Falfield and Easingwold.

The vehicle strength of the Section was 35 ambulances and 5 personnel and equipment vehicles.

The total strength of the Section at the end of the year was:—

	Class			
Recruits.	A.	B.	Active.	Reserve.
1,219	521	40	1,780	1,396

Training in Nursing Regulations, 1963.

The Ministry of Health Circular 9/63 provides for local health authorities to train as many people as possible in first aid and home nursing to enable families to care for themselves and their neighbours in the event of an emergency until the organised services arrive.

In the first instance training will be given to the County Hall staff, then by delegation to the staffs of County Districts and eventually to the staffs of offices and industrial premises and the general public. To organise and administer the scheme it was decided that an officer should be appointed on the staff of the Ambulance Section of the County Health Department.

TABLE I.
WORK DONE BY THE UNIFIED AMBULANCE SERVICE 1961-1963.

Year.	EMERGENCY.						MATERNITY.				GENERAL.											
	Accident.		Illness.		False Alarms.		Total.		Total.		Hospital.		Out-Patient.		Infectious Diseases.		Private.		Non-Patient.		Abortive Miles.	
	Patients.	Miles.	Patients.	Miles.	Miles.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.
1961	13,518	86,834	3,795	25,830	11,548	17,313	124,212	6,407	66,138	58,358	674,900	394,829	2,720,726	1,013	16,354	683	8,081	—	—	—	—	20,071
1962	13,178	85,652	4,167	27,298	11,639	17,345	124,589	6,086	61,874	61,931	668,260	396,788	2,757,409	879	13,894	615	6,416	—	—	—	—	19,809
1963	14,199	92,352	4,864	32,678	13,233	19,063	138,263	6,142	64,850	63,173	690,524	434,634	2,949,670	875	12,551	628	7,069	68,265	—	—	—	23,508

TOTALS.

Year.	Emergency.		Maternity.		General.		Grand Total.	
	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.
1961	17,313	124,212	6,467	66,138	454,883	3,440,332	478,663	3,630,682
1962	17,345	124,589	6,086	61,874	460,213	3,465,788	483,644	3,652,251
1963	19,063	138,263	6,142	64,850	499,310	3,751,587	524,515	3,954,700

TABLE II.

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

Year.	County Service.		Voluntary Organisations.				Hospital Car Service.	
	Patients.	Miles.	S.J.A.B.		B.R.C.S.		Patients.	Miles.
			Patients.	Miles.	Patients.	Miles.		
1961	343,282	1,877,436	63,671	518,947	8,223	75,017	63,487	1,159,282
1962	341,584	1,872,548	69,106	524,778	9,614	74,167	63,340	1,180,758
1963	373,515	2,123,884	76,834	511,917	9,898	73,354	64,268	1,245,545

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.

CHEST CLINIC ORGANISATION.

At the end of the year plans were well in hand for the transfer of Mortlake Chest Clinic to the Royal Hospital, Richmond. Mortlake was the only clinic in Surrey remaining to be upgraded.

Tuberculosis visiting throughout the County is undertaken by 36 health visitors of whom 16 devote full time to the tuberculosis service. The remainder are general health visitors who undertake the tuberculosis visiting in certain rural areas of the County. During 1963 these health visitors paid a total of 14,211 visits to tuberculous households and attended 2,903 chest clinic sessions.

Of all new patients (excluding contacts) seen at chest-clinics in 1963, viz. 6,330, only 272 were tuberculous. The remaining 6,058 were non-tuberculous, making the ratio of tuberculous to non-tuberculous patients approximately 1 : 23, 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.

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.

In 1963, 2,342 new contacts were seen at chest clinics which represents a decrease of 346 from the 1962 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 91).

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 50 where it will be seen that 17 contacts who on first examination were non-tuberculous later developed the disease.

(ii) B.C.G. Vaccination.

This scheme, details of which will be found in my report for 1961 and earlier years, continues to function satisfactorily.

The following table shows the number of contact vaccinations carried out by the Chest Physicians in each Chest Clinic area during the year 1963. 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 42).

Chest Clinic.	Total.
Carshalton	24
Dorking	37
Egham	29
Epsom... ..	122
Farnham	51
Guildford	125
Kingston	123
Merton and Morden... ..	41
Milford	5
Mitcham	39
Mortlake	78
Purley	27
Redhill	90
Sutton	99
Weybridge	100
Wimbledon	57
Woking	96
Total	1,143

(iii) *Garden Shelters.*

At the end of the year twelve shelters were on loan to tuberculous patients.

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

Chest Clinic.	Population of Clinic Area.	No. of T.B. Cases on the Register on 1/1/63.	No. of New Cases Definitively T.B. (including contacts diagnosed T.B.)	No. of T.B. Cases on the Register on 31/12/63.	No. of T.B. Cases on the Clinic Register per 1,000 Population on 31/12/63.	No. of New Contacts Attending.	No. of Contacts Found to be Definitely T.B.			Clinic Sessions.	Attendance.	Average Attendance per Clinic Session.
							New.	Old.	Total.			
Carshalton ...	56,020	394	14	342	6.10	49	—	—	—	162	2,064	12.7
Dorking ...	37,123	105	5	99	2.67	53	—	—	—	48	787	16.4
Egham ...	31,220	189	1	182	5.83	54	—	—	—	59	766	13.0
Epsom ...	107,590	394	22	385	3.58	209	1	2	3	231	4,129	17.9
Farnham ...	80,282	283	14	245	3.05	160	3	—	3	192	2,680	14.0
Guildford ...	129,592	731	20	742	5.73	190	2	1	3	228	5,357	23.5
Kingston ...	207,220	667	60	614	2.96	291	—	5	5	397	6,165	15.5
Merton and Morden ...	67,090	556	16	508	7.57	44	—	—	—	212	3,175	15.0
Milford ...	30,026	154	1	153	5.10	20	—	—	—	143	1,253	8.8
Mitcham ...	95,980	306	15	256	2.67	142	—	—	—	157	2,342	14.9
Mortlake ...	79,330	359	33	367	4.63	132	1	1	2	236	2,800	11.9
Purley ...	109,590	468	12	395	3.60	85	—	—	—	175	2,201	12.6
Redhill ...	123,417	507	12	435	3.52	191	—	1	1	133	2,632	19.8
Sutton ...	111,850	660	25	585	5.23	160	2	—	2	224	4,379	19.5
Weybridge ...	89,440	558	16	585	6.54	199	—	3	3	157	2,517	16.0
Wimbledon ...	56,980	260	14	257	4.51	145	1	4	5	110	1,831	16.6
Woking ...	89,580	727	13	711	7.94	218	—	—	—	162	2,681	16.5
Totals ...	1,502,330	7,318	293	6,861	4.57	2,342	10	17	27	3,026	47,759†	15.8

† 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 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 the same team of social workers covered both sets of duties. The establishment was increased during the year from 17½ to 21 by the addition of a half-time professional trained, 2 general-trained social workers and a welfare assistant and the division of their time between the two services became approximately 9.5 for chest work and 11.5 for family social work in the health divisions. The demands upon the time of the chest clinic almoners for the care of the non-tuberculous chest cases, in particular those with chronic bronchitis and lung cancer, continued to increase. Two of the social workers, the Care Organiser and the Deputy Care Organiser continued to spend half of their time at the central office co-ordinating the work of the team and the other half on field work for chest cases and family social work respectively.

Provision of Milk Free of Charge.

The average number of tuberculous patients receiving milk free of charge each week throughout the year was 389 (401 the previous year).

Care Committees for Tuberculosis and Chest Diseases.

The nineteen voluntary Care Committees continued to give excellent service to patients attending the chest clinics. Work for the non-tuberculous chest patients and their families continued to expand as the needs of the tuberculous lessened.

Throughout the year, the Care Committees raised approximately £8,397 by their own efforts, and received £1,860 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 £10,395 covered a wide range of items to meet individual needs, but the main items were food (£3,071), clothing, bedding and household items (£1,955), rehabilitation (£559), pocket money for patients in hospital and fares for relatives to visit (£530) and holidays (£2,386).

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 £2,520 during the year which included a grant of £400 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 (£222), loans and grants where substantial amounts are required for resettlement after treatment (£372), and summer holidays for families at the country and seaside (£1,717).

The beach chalets which were hired by the Conference provided a fortnight's holiday each for some 63 families comprising approximately 120 adults and 165 children who were selected by the chest physicians. The County Education Committee again granted the use of Sheephatch School for a fortnight's holiday for 100 child "contacts" and contributed 25 per cent of the cost.

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 year. Students have attended for their practical experience during the year.

ORGANISATION.

In addition to home visiting, Occupational Therapy is provided at 14 classes in different parts of the County, namely at New Malden, Kingston, Wimbledon, Woking, Guildford, Esher, Mitcham, Ottershaw, Purley, Epsom, Leatherhead, Camberley and Richmond (2). The chest wards of four hospitals are visited regularly and instruction in art is given voluntarily on Wednesday mornings at New Malden together with limited home visiting. The Standing Conference of Surrey Care Committees for Tuberculosis and Chest Diseases meets the expenses for general materials and travelling. Exhibitions and Sales have been most satisfactory, the Mobile Shop again proving a valuable means in the selling of completed articles. The number of firms visited has increased and all showed great interest and co-operation. The County Show included an exhibit of the work of the Unit.

There has been a large increase in the volume of remunerative occupations. Another aspect of the work which has grown considerably is the construction by technical instructors of aids to daily living.

The Standing Conference of Surrey Care Committees for Tuberculosis and Chest Diseases and individual Care Committees have again given valuable assistance to the Unit, and the Voluntary Association for Surrey Disabled have also given considerable help. The amount expended on consumable materials was £4,371 15s. 8d. compared with £3,700 14s. 9d. in 1962.

The number of persons registered for Occupational Therapy during the year was 67 Chest patients as compared with 81 in 1962 and 118 other handicapped persons as compared with 128 in 1962. The average number of domiciliary visits is approximately the same as in previous years; the standard of work generally remains very high.

The table below shows the number of persons receiving Occupational Therapy at 31st December, 1963.

Category.	Domiciliary.	Hospitals.	Classes.	Postal.	Total.
Chest	150	39	Nil	40	229
Other handicapped ...	237	Nil	208	51	496
Total	387	39	208	91	725

Rehabilitation and Colonisation.

During 1963 the Council were liable for the maintenance of 4 tuberculous patients at the following institutions :—

Enham-Alamein	1
Papworth	2
Sherwood Village Settlement ...	1

Chest Physicians also use the facilities available at the Government Training Centres at Waddon and Egham.

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 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 1963 the Surrey Mass Radiography Service x-rayed 136,533 persons. These examinations were carried out by two separate services as follows :—

General Practitioner Chest X-Ray Service	13,353 examinations.
Normal Mass Radiography Service	123,180 examinations.

The Medical Director points out that the statistics relating to pulmonary tuberculosis show no definite trend towards improvement. General practitioners referred more patients for examination and the number of cases of pulmonary tuberculosis has increased. The percentage of cases proved infectious, however, has decreased, suggesting that practitioners are now referring patients for chest x-ray at an earlier stage in the disease. However, the results of the last five years' work by the Surrey Mass Radiography Unit do not justify a complacent attitude towards tuberculosis.

In the period 1959 to 1963—

- 580,651 examinations were made.
- 892 cases of Significant Pulmonary Tuberculosis were detected.
- 230 (25.8%) of these cases were proved to be infectious.
- A case of Significant Pulmonary Tuberculosis was found every two days.
- An infectious case of Pulmonary Tuberculosis was discovered every eight days.

The number of cases of Primary Lung Cancer found in male patients referred by general practitioners has increased but the incidence is tending to fall. This is believed to be the result of doctors sending more men over 45 years of age for a routine chest x-ray, thus producing a dilution effect.

A case of lung cancer (total 502 cases) was diagnosed every three and a half days.

The Medical Director states in conclusion that more examinations could be made in the Units at sessions open to the general public. He advocates a national publicity campaign to encourage people to volunteer for a routine chest x-ray.

The following statistics give an indication of the work of the Surrey Mass Radiography Units during 1963 and the two previous years :—

	General Practitioner Chest X-ray Service.			Normal Mass Radiography Service.		
	1961	1962	1963	1961	1962	1963
Total number X-rayed	11,144	11,177	13,353	109,679	108,322	123,180
Significant Pulmonary Tuberculosis* ...	54	43	51	153	151	130
Primary Lung Cancer in men aged 45 and over	55	48	62	38	29	51
Incidence rate per 1,000 examinations ...	20.1	16.4	18.2	2.0	1.4	2.3
Primary Lung Cancer in women aged 45 and over	15	6	11	2	4	7
Incidence rate per 1,000 examinations ...	6.8	2.8	4.3	0.1	0.3	0.4

* "Significant pulmonary tuberculosis" includes any newly detected case requiring treatment or close observation at a chest clinic.

General Practitioner Chest X-ray Service.

TYPE OF SURVEY.	TOTAL X-RAYED.			NUMBERS SHOWING EVIDENCE OF SIGNIFICANT PULMONARY TUBERCULOSIS.					
	MALE.	FEMALE.	TOTAL.	MALE.		FEMALE.		Combined Total.	Combined Incidence Rate per 1,000 Examinations.
				No. of Cases.	Incidence per 1,000 examinations.	No. of Cases.	Incidence per 1,000 examinations.		
General Practitioner referrals ...	7,005	6,348	13,353	31	4.4	20	3.2	51	3.8

Normal Mass Radiography Service.

General Public ...	19,496	27,371	46,867	31	1.6	18	0.7	49	1.0
Industrial Groups ...	41,915	22,313	64,228	43	1.0	13	0.6	56	0.9
School Children ...	2,092	895	2,987	—	—	—	—	—	—
Mental Hospitals and Institutions	2,570	3,333	5,903	9	3.5	13	3.9	22	3.7
Contacts at work...	1,020	655	1,675	1	1.0	—	—	1	0.6
Medical Officers of Health referrals ...	458	1,062	1,520	1	2.2	1	0.9	2	1.3
Totals ...	67,551	55,629	123,180	85	1.3	45	0.8	130	1.1

Analysis of Abnormal Findings—Pulmonary Tuberculosis.

Disposal of Cases.	General Practitioner Chest X-ray Service.				Normal Mass Radiography Service.			
	Male.	Female.	Total.	Incidence Rate per 1,000 Examinations.	Male.	Female.	Total	Incidence Rate per 1,000 Examinations.
Recommended for domiciliary treatment ...	8	5	13	1.0	28	8	36	0.3
Recommended for Hospital treatment ...	12	10	22	1.7	27	19	46	0.3
Close clinic supervision required...	11	5	16	1.2	30	18	48	0.3
Totals ...	31	20	51		85	45	130	
Occasional out-patient supervision	25	11	36	2.7	71	42	113	0.9
(a) Non-infectious cases ...	21	13	34		62	33	95	
(b) Infectious cases ...	9	5	14		15	8	23	
(c) Not determined ...	1	2	3		8	4	12	
Totals ...	31	20	51		85	45	130	

*Analysis of Abnormal Findings—Non-Tuberculosis Conditions.***General Practitioner Service and Normal Mass Radiography Service—Combined Statistics**

Condition.	Male.	Female.	Total.
Malignant neoplasms in the thorax :—			
(a) Primary tumours ...	116	20	136
(b) Secondary tumours ...	8	6	14
Non-malignant tumours ...	13	18	31
Lymphadenopathies, excluding sarcoidosis	2	—	2
Sarcoidosis (including enlarged hilar glands)	33	22	55
Congenital abnormalities of the heart and vascular system	6	3	9
Acquired abnormalities of the heart and vascular system	139	85	224
Pneumoconiosis without P.M.F.	8	—	8
Pneumoconiosis with P.M.F....	1	—	1
Bacterial and virus infection of lung (including pneumonitis)	755	516	1,271
Bronchiectasis ...	50	25	75
Pulmonary fibrosis (non-tuberculous)	32	14	46
Spontaneous pneumothorax ...	17	2	19
Abnormalities of the diaphragm and oesophagus (including hiatus hernia of stomach)	14	42	56
Pleural Effusion (non-tuberculous) ...	6	4	10

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, and abnormality) 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 14s. 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, 1963, are as follows:—

	<i>Hospital In-Patients.</i>	<i>Hospital Out-Patients.</i>	<i>General Practitioners' Cases.</i>	<i>Total.</i>
Number of patients sent to Holiday Homes	70	84	132	286
Cost (before deduction of contributions by patients)	£756	£1,012	£1,400	£3,168
Lengths of stay: 1 week	2	—	10	12
2 weeks	66	76	113	255
3 weeks	1	7	9	17
4 weeks	1	2	—	3
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 Guildford Old People's Welfare Committee and Farnham Women's Voluntary Services, and up to a maximum of £50 per annum by Mitcham Old People's Welfare Committee, Wimbledon Guild of Social Service, and the Womersley Old People's Welfare Committee in running their night attendance schemes on the understanding that payment shall be limited to the loss on fees plus bus fares and that no part of the Council's contribution shall go towards payment of administrative expenses.

Five cases were admitted to nursing homes during the year under a scheme approved by the Council as extension to the night attendance by payments of grants of up to £1 a day to recognised voluntary bodies which, subject to prior approval by the County Medical Officer, arrange for bed-ridden patients for whom no other care is available to be maintained in nursing homes or old people's homes for a maximum period of three months.

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, 1963, was as follows:—

<i>Article.</i>	<i>No. of Loans.</i>	<i>Article.</i>	<i>No. of Loans.</i>
Air beds	33	Bed cradles	500
„ bellows	20	Crutches	254
„ rings	886	Douche cans... ..	3
Bed rests	980	Feeding cups	187
„ pans	1,910	Inhalers	16
„ tables	117	Mackintosh sheets	1,453
Invalid chairs	1,191	Steam kettles	8
Commodore	1,158	Urinals	671

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 :—

1963.	Guildford Clinic.	Redhill Clinic.	St. Helier Clinic.	Woking Clinic.	Croydon Clinic.	Other Clinics.	Total.
New Cases (Surrey).							
Syphilis	1	—	6	1	2	21	31
	(6)	(1)	(4)	(1)	(4)	(20)	(36)
Gonorrhoea	56	5	61	10	18	177	327
	(28)	(8)	(55)	(5)	(18)	(159)	(273)
Other conditions	250	34	488	49	124	1,112	2,057
	(246)	(32)	(510)	(33)	(100)	(909)	(1,830)
Totals	307	39	555	60	144	1,310	2,415
	(280)	(41)	(569)	(39)	(122)	(1,088)	(2,139)

The figures in brackets relate to the year 1962.

I mentioned in my report last year that there was only a slight improvement in the number of cases of syphilis compared with 1961, when the number of cases was the highest since 1956. It will be seen from the table below that there has been a further slight improvement in the number of such cases during 1963. The number of gonorrhoea cases increased by fifty-four, however, compared with 1962 when there had been forty-four fewer cases than in 1961. It will be seen that the number of such cases (327) is the highest in the years back to 1948 shown in the table.

Year.	Syphilis.	Gonorrhoea	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
1962	36	273	1,830	2,139
1963	31	327	2,057	2,415

* The great majority of these conditions are not venereal.

Health Education.

Those whose special responsibility is the health education of the general public are faced with a very difficult task. Few adults at the present time have had any systematic education in health during childhood and consequently many parents do not themselves practise and are not able to pass on to their children sound principles of healthy living. Yet it is notoriously difficult to change radically the behaviour pattern of adults, since to do so involves imparting new facts, building up new habits in place of old ones well established, and substituting new attitudes for old ones deeply ingrained.

Yet despite all difficulty, much can be achieved by concentrated effort. By selecting one or two simple facts of basic importance, one or two habits and one or two attitudes, and labouring their

importance incessantly, the health staff can influence even adult health behaviour. The main obstacle is often not so much the stubbornness of the public as the vested interest of certain manufacturers. This is especially so in what is perhaps the public's prime deficiency—its magical regard for the bottle of medicine, in the consumption of tranquillising and stimulating tablets and in the smoking of tobacco, especially cigarettes.

It is salutary to record, therefore, the wealth of activity gathered under the general heading of routine health education, all of which is intended to motivate members of the community to develop ideals of good citizenship in health matters. There has been a steady increase in the mothercraft and parentcraft sessions undertaken in the clinics, mainly by the health visitors, supported by assistant medical officers, nurses, midwives, physiotherapists, speech therapists and the dental staff. Officers of the Ambulance Service have also assisted in this work, notably in conducting practical lectures on mouth-to-mouth resuscitation in schools and clinics.

Many members of the staff have also stepped up the number of talks to schools, especially following the conferences of Heads of Schools referred to later in the Report. This link between the teaching and health staffs is one which it is hoped will continue to strengthen in the interests of the children. In addition the health visitors paid regular visits to schools during the course of the year when many individual health problems were discussed with Heads, School staffs and pupils. In many districts the public health inspectors in collaboration with the Medical Officers of Health, have visited schools to talk on aspects of community health.

In the wider field members of the staff have spoken to a great variety of organisations such as St. John Ambulance Brigade, British Red Cross Society, Women's Institutes, Townswomen's Guilds, Parent-Teacher Associations, Old People's Welfare Committees, Territorial Army, Youth Organisations, Mothers' Unions and political organisations. One division conducts a weekly "teenage" group on health education at one of the clinics. The Health Education Officer, who takes a direct part in this field work, spoke to audiences totalling nearly 4,000 people during the year. The topics involved in all this work cover an ever-widening aspect of healthy living including immunisation, smoking and health, food hygiene, clean air and smokeless zones, work of the health department, fluoridation, dental health, venereal diseases, home nursing, first aid and hygiene, artificial respiration, care of the feet and hair, diet, accident prevention, growth and development and the personal health services.

To meet this developing programme in-service courses on teaching method in relation to health education have been conducted for District Nurse Tutors and Teaching Midwives, and places for six Health Visitors were reserved at a national part-time teaching course. Special attention has been given to teaching methods at the County Training Courses for Health Visitors and District Nurses. Health Visitor students have received teaching practice by kind co-operation of the Heads of Schools throughout the County, and this link has been preserved when the students have subsequently taken up full-time duty in the districts. In addition many members of the department, including for the first time the staffs of mental health training centres, have been afforded facilities for training as cine-projectionists in order to make their work more effective.

Special campaigns involved Immunisation, Dental Health, Accident Prevention and Smoking and Health.

The Immunisation campaign, which extended over London and the Home Counties, was concentrated into two periods of a fortnight each, one of which was held in September, and the second in the ensuing year. Simultaneous press publicity was provided covering a circulation of 350,000 in Surrey emphasising the need for joint prophylaxis. The campaign was supported by a wide distribution of posters and leaflets both in County Council clinics and in suitable sites provided by district councils, while the simultaneous showing of the Ministry's filmlet on television provided national coverage. Divisional Medical Officers provided excellent editorial support in local journals while health visitors arranged special displays and gave many talks in the clinics and welfare centres on this theme. In Surrey some 2,000 posters and 26,000 leaflets were distributed in the first part of this campaign. In some areas film slides were used in cinemas.

Publicity for the Smoking and Health campaign emphasised variety of approach in its appeal. In addition to the work carried out in the Schools and Youth Clubs, mentioned later in the Report, posters of nine different designs were distributed widely in the community according to their suitability. Thousands of new anti-smoking bookmarks were extensively used in public and school libraries and other places. The preparation of a leaflet addressed to parents was put in hand for production during the ensuing year. In some areas many factories and offices received publicity material on smoking, and copy was provided for insertion in the various County newspapers. An approach was made to every Independent school within the County and lectures were given in about 20 of these.

Local campaigns on safer living in a highly urbanised modern community, centred on clinics and geared to seasonal relevance, have also been featured. Christmastide, for example, was made the opportunity in one area for a special campaign on the dangers of Christmas decorations; in other areas the inflammability of young children's clothing was stressed; while in a third area safety measures for the elderly were given prominence. Another area carried out a Home Safety competition for school children which resulted in 1,400 entries being received. Subsequently, official presentation of prizes took place in the Town Hall.

This year the number of health displays has shown a considerable increase. Support has been given to many district councils in their "Welcome to Citizenship" and other publicity campaigns. An increase of photographic and other visual display material and equipment has enabled the department to assist many local efforts. Members of the staff have given their time to assist at these functions whose purposes are to stimulate interest in health as a valued community asset, to promote the development of the health services and to encourage the general public to make proper use of such services.

Chiropody.

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

The chiropody service came into operation on 9th May, 1960, and continues to be administered directly by the Council through the divisionalised service which caters for the elderly, handicapped persons and expectant mothers and indirectly for the elderly through voluntary bodies with financial help from the County Council in the form of grants based on the rate for surgery and domiciliary treatments, sessional fees, travelling expenses and other items such as dressings, hire of accommodation and administration.

The majority of treatments given under the indirect service were at chiropody clinic sessions and although the number of sessions in some instances were increased an attempt was made to bring some of the patients treated at Chiropodists' surgeries and by domiciliary visits under the control of the direct service. As a result, whereas the total number of treatments given under the indirect service remained fairly constant the numbers of treatments given under the direct service increased appreciably.

At the beginning of the year it was evident there was a need for some form of control over the number of chiropody treatments being given and a meeting was held with representatives of the private Chiropodists operating within the scheme. It was agreed that the number of treatments given to patients should not be restricted during the first three months of treatment, but after three months' treatment had elapsed the number of treatments given to each patient should not exceed six per annum without the divisional medical officer's authority. A meeting was also held with representatives of the voluntary bodies and local organisers of the chiropody clinics operating through these bodies and it was agreed that the same arrangements with regard to limitation of treatments should apply to the indirect service. The County Council also decided, in view of the exceptional growth in the chiropody service, that a Chief Chiropodist should be appointed who would be required to devote the major proportion of his time to supervising the service in the field, but who would also carry out chiropody sessions under the direct service. The Chief Chiropodist commenced his duties on 2nd September, 1963.

An award by the Industrial Court dating from 1st January, 1963, for appropriately qualified Chiropodists employed under sessional arrangements was accepted as a basis for grants under the indirect service so far as treatments given at sessions were concerned. An award by the Industrial Court dating from 1st July, 1963, applicable to surgery and domiciliary treatments under the direct chiropody service was also accepted as a basis for grants to voluntary bodies in respect of such treatments. The chiropody treatment which is given under the direct and indirect service continues to cost the patient 3s. 0d. for each treatment but this can be reduced in necessitous cases and free treatment is available to patients who are in receipt of National Assistance.

In respect of the year ending December, 1963, grants totalling £14,538 were paid to voluntary bodies providing chiropody services and the cost of the direct service provided for the elderly (including 47 sessions held at private and voluntary homes for the elderly), handicapped persons, the blind and partially sighted and expectant mothers amounted to £12,158 (after deducting contributions received from patients in each case).

The number of treatments given through the indirect service during 1963 was 43,834 compared with 44,690 in 1962.

Particulars of persons treated directly under the County Council's scheme during 1963 are as follows:—

Number of expectant mothers treated	19	(27)
Number of handicapped persons treated	474	(374)
Number of registered blind or partially sighted treated	104	(84)
Number of elderly persons treated	5,942*	(3,495)
Total number of treatments given	37,455*	(24,053)
(The figures in brackets relate to the year 1962.)		

* Includes 83 patients who were given 334 treatments in private and voluntary homes for the elderly under sessional arrangements.

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, 1964, was 556.0. The average number of equivalent full-time helps employed weekly throughout the calendar year was 532.5, which was 11 more than in 1962.

Supervision.

During the year the Divisional Supervisors paid 7,160 first visits, 15,147 revisits and 3,526 miscellaneous visits, a total of 25,833 compared with 26,430 for the previous year.

The Scope of the Scheme.

The total number of cases helped during 1963 was 9,150 an increase of 184. The number of acute and tuberculosis cases decreased by 140 and 27 respectively, whilst the number of chronic sick and maternity cases increased by 247 and 104.

The following table gives an analysis of the services provided to the various types of cases in the County as a whole.

Type of case.	Number of cases helped during 1963.	Hours of service given during 1963.	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 cases being helped per week.
Maternity	2,419 (26.4%)	123,485 (12.8%)	51	21.2	2.4	114 (3.3%)
Acute	1,332 (14.6%)	43,926 (4.5%)	33	6.2	5.3	136 (3.9%)
Chronic	5,347 (58.4%)	793,682 (81.8%)	148	4.8	30.9	3,170 (91.8%)
Tuberculosis	52 (0.6%)	9,172 (0.9%)	176	5.5	32.1	33 (1.0%)
County 1963	9,150 (100%)	970,265 (100%)	106	5.4	19.7	3,453 (100%)
County 1962	8,966 (100%)	958,032 (100%)	107	5.6	19.2	3,314 (100%)

The table on page 60 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 61 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.

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 1963, 74 cases received a total of 6,414 hours service.

Neighbourly Help Scheme.

In 1961 the Council agreed 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 has proved useful in helping to combat the shortage of home helps in certain areas, and in some cases by giving a more regular service than could be given by the home help service.

During 1963, 211 cases received the services of a neighbourly help at a total cost of £7,952 for the year which is equivalent to 18.8 whole-time helps each week.

"Dirty Money."

In June, 1962, the County Health Committee considered whether special payment should be made to home helps called upon to carry out arduous work in extremely distasteful circumstances in order to restore premises to conditions of cleanliness and comfort, and decided to give authority for special payments to be made at the discretion of the Divisional Medical Officer in the following types of case :—

- (a) 10s. for an initial clean up of neglected or filthy cases which are not so insanitary as to justify their being referred to the County District Council for action under the Public Health Acts.
- (b) A plus rate of fourpence an hour for the continued cleaning and care of premises where normal standard of cleanliness is low, or conditions sub-standard.

During 1963, 28 cases in category (a) and 49 in category (b) had been dealt with.

Division or District.	Population mid-1963.	Average. equivalent F/T Helps employed during 1963.	Total number of cases helped during the year.					Percentage of Home Helps' time spent on			
			Maternity.	Acute.	Chronic.	T.B.	Total.	Service to patients.	Travelling Time.	Sickness.	Holidays.
DIVISIONS.											
North-Western ...	182,840	68,881	262	97	367	3	729	85.8	4.0	4.1	6.1
Central ...	232,030	42,841	469	187	910	7	1,573	80.7	6.7	6.0	6.6
North Central ...	207,220	24,128	305	114	625	3	1,047	84.8	4.7	3.8	6.7
Southern ...	152,580	125,760	170	75	512	3	760	85.8	4.9	4.2	5.1
South-Eastern ...	114,900	22,414	471	325	332	5	1,133	86.1	2.2	5.5	6.2
Northern ...	79,330	6,628	82	40	481	6	609	84.0	4.3	5.2	6.5
South-Western ...	184,620	127,026	247	210	405	2	864	85.1	5.3	3.5	6.1
North-Eastern ...	187,490	9,381	154	123	1,119	15	1,411	81.1	5.3	7.3	6.3
Merton and Morden U.D.	67,400	3,237	73	45	412	4	534	80.2	5.7	7.6	6.5
Mitcham M.B. ...	63,350	2,932	52	49	392	3	496	80.7	4.7	8.6	6.0
Wimbledon M.B. ...	56,740	3,212	29	29	315	8	381	83.1	5.5	4.9	6.5
Mid-Eastern ...	88,580	6,391	84	92	402	3	581	80.1	7.3	6.7	5.9
Beddington and Wallington M.B. ...	32,470	3,045	46	64	216	1	327	79.6	7.1	7.4	5.9
Carshalton U.D. ...	56,110	3,346	38	28	186	2	254	80.8	7.6	5.6	6.0
District with Delegated Health Functions											
Woking U.D. ...	72,740	15,708	175	69	194	5	443	86.4	3.4	4.6	5.6
County 1963 ...	1,502,330	449,161	2,419 26.4%	1,332 14.6%	5,347 58.4%	52 .6%	9,150 100%	83.5	4.9	5.4	6.2
County 1962 ...	1,491,000	449,161	2,315 25.8%	1,472 16.4%	5,100 56.9%	79 .9%	8,966 100%	84.4	4.9	4.9	5.8

Division or District.	Average weekly number of cases helped.						Average service per case.											
	Maternity.	Acute.	Chronicle.	T.B.	Total.	Per equivalent F/T Home Help employee.	Per 10,000 popula- tion.	Maternity.		Acute.		Chronicle.		T.B.		Total.		
								Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.	Hours per week.	Duration in weeks.			
DIVISIONS.																		
North-Western	14	8	196	2	220	4.9	12.0	18.5	2.7	10.3	4.4	6.5	27.7	5.1	33.0	7.4	15.6	
Central	27	19	480	4	530	7.5	22.8	16.9	2.9	4.3	5.2	3.8	27.3	7.1	30.4	4.5	17.5	
North-Central	14	22	430	2	468	8.2	22.6	24.7	2.3	4.3	10.0	3.8	35.5	5.5	37.9	4.4	15.5	
Southern	8	5	266	1	280	5.6	18.3	22.6	2.5	9.5	3.6	5.8	27.3	5.9	15.7	6.4	19.2	
South-Eastern	17	24	206	3	250	5.8	21.8	24.8	1.8	5.7	3.9	4.8	32.6	4.5	30.5	6.3	11.4	
Northern	4	5	273	5	287	6.7	36.2	15.3	2.6	4.8	6.9	5.1	29.3	3.8	37.8	5.2	24.6	
South-Western	10	21	278	1	310	6.1	16.8	25.2	2.1	6.2	5.1	5.2	35.7	4.6	25.5	5.9	18.6	
North-Eastern	7	18	724	9	758	6.4	40.4	26.4	2.3	7.8	7.6	5.1	33.9	5.2	31.7	5.4	28.2	
Merton and Morden U.D....	3	5	269	3	280	6.4	41.5	24.9	2.2	5.1	5.9	5.0	33.8	4.7	36.8	5.2	27.4	
Mitcham M.B.	3	10	250	2	265	5.7	41.1	26.6	2.4	9.0	10.4	5.6	32.9	6.9	38.1	5.9	28.0	
Wimbledon M.B.	1	3	205	4	213	6.9	37.6	29.2	2.5	9.0	4.9	4.8	33.8	4.8	25.9	5.0	29.5	
Mid-Eastern	4	8	215	2	229	8.6	25.9	22.9	2.2	4.9	4.2	3.6	28.1	3.1	34.8	3.9	20.9	
Beddington and Wallington M.B.	2	6	117	—	125	7.4	38.6	24.1	2.4	4.8	4.6	4.1	28.4	4.7	8.1	4.6	19.9	
Carshalton U.D.	2	2	98	2	104	10.1	18.5	21.3	2.1	5.4	3.1	3.0	27.4	3.0	47.6	3.3	21.7	
Districts with Delegated Health Functions																		
Woking U.D.	9	6	102	4	121	4.6	16.6	18.5	2.7	10.8	4.7	6.6	27.2	8.4	39.6	7.8	14.2	
County 1963	114 3.3%	136 3.9%	3,170 91.8%	33 1.0%	3,453 100%	6.5	22.9	21.2	2.4	6.2	5.3	4.8	30.9	5.5	32.1	5.4	19.7	
County 1962	115 3.5%	141 4.2%	3,017 91.0%	41 1.3%	3,314 100%	6.4	22.2	21.7	2.6	6.4	4.9	4.9	30.7	6.4	27.0	5.6	19.2	

MENTAL HEALTH SECTION.

Building Programme.

In no section of the work of the department has the London Government Act created more complications than in the mental health section. The reason is quite clear, namely that the training centres, hostels, etc., draw their clientele from a wide field which covers more than one of the new London Boroughs and in many cases also involves parts of the New Surrey. The most careful consideration has been needed to adjusting the development programme to meet the needs of the reduced County. The early part of the programme concentrated largely on the requirements of the population in Metropolitan Surrey where the needs were most urgent. When these projects are handed over to the new boroughs, Surrey will be faced with the need to provide similar services for the areas which are at present linked with the above. This will mean the resiting of capital projects in some areas. To some extent this should help in the difficult task of securing sites.

The new Adult Technical Wing at the Guildford Centre was opened in the year. The building work on the Caterham and Ham Training Centres was delayed by the bad weather of the 1962-63 winter and they will not now be completed until the second half of 1964. Work on the Morden Special Care Unit has not been started. There were further delays with planning consents in respect of the Wallington Hostel for former mentally ill patients and the building work is not likely to be completed until early in 1965.

The County Architect has well in hand the schemes for the Hostel for Adult Subnormal Females at West Molesey, the Junior Training Centre at Walton-on-Thames, and the Adult Technical Training Centre at Banstead.

During 1963 considerable progress was made in securing sites for Hostels and Centres and there is some indication that the public opposition experienced immediately following the 1959 Act is easing. This is a hopeful sign and despite the fact that building projects have many obstacles to overcome before completion, the outlook is encouraging.

The demands for residential care both in County establishments and in Homes and Hostels run by voluntary organisations increased considerably. As there is little doubt that residential care will play a major part in the community services, the number of places to be provided is being kept under constant review. At the end of the year there were 96 cases in residential care for whom the County have accepted responsibility.

The field work is mainly covered from offices scattered throughout the County and the staff at Central Office is responsible for the supervision of the case work of 17 male, 15 female mental welfare officers and social workers, 3 trainee mental welfare officers, and the mental health work undertaken by 194 health visitors as part of their normal health visiting duties.

The year proved beyond doubt that there is a growing need for special care places in the training centres, both for the physically handicapped subnormal or for those with behaviour problems. It is regretted that most of the existing premises were either too small or unsuitable to set up classes for these.

At the end of the year there were 513 trainees on the registers and 87 on the waiting lists.

Central staff are also responsible for the staffing, organisation, administration and day-to-day running of the 8 training centres (including 1 adult technical centre). Speech Therapists and Physiotherapists are employed at the Centres under the supervision of the medical staff.

Although permanent admissions to psychiatric hospitals and hospitals for the subnormals is still a serious problem, no difficulty is experienced in admitting really urgent cases. The County's Hostel for Subnormal Children at Send has eased the position considerably as regards the admissions of subnormal children.

There are 27 psychiatric out-patient clinics in the County staffed by hospital medical officers by arrangements made by the Regional Hospital Board. The County's field staff form part of the clinic teams and are encouraged to attend the case conferences at the hospitals. The specialist staff of the hospitals continue to give valuable help and advice to the County's officers.

Guardianship.

The Council have only one patient who is subject to statutory guardianship under the Mental Health Act, 1959, and there appears to be little need for this type of care.

However, there were at the end of 1963, 28 subnormal and severely subnormal persons maintained with the Guardianship Society on an informal basis.

Hostels.

It had been hoped that it would have been possible to have commenced work on the adaptations to the hostel for ex-mentally ill patients in Wallington. By the end of 1962 it was felt that the remaining planning difficulties were only minor ones and that it should have been possible for the project to be proceeded with during 1963. However, it is regrettable that although planning permission was finally granted it was too late in the year for building work to commence before 1964. It is noteworthy that the Minister of Housing and Local Government gave consent on planning grounds in 1960 following a Public Inquiry.

Even after hostels are physically in being considerable difficulty is experienced in getting them established. In 1962 the Council's hostel for subnormal children was opened at Send. During the

whole of 1962 considerable difficulty was experienced in obtaining suitably qualified staff to run the home. In the middle of the year a young married matron was appointed. Unfortunately she left in November to commence her own family. A complete absence of trained staff in December led to the unit being temporarily closed down. I am extremely grateful to Botleys Park and Queen Mary's Hospitals for the assistance given to us during this very difficult period. Towards the end of the year fresh salary scales were approved and an experienced matron was appointed to commence her duties in the first few days of 1964 and it is hoped that, whilst there will, no doubt, be considerable difficulties ahead, 1964 will see the unit functioning normally.

However, a great deal of very valuable information was obtained during 1963 regarding the running of these units and above all it became clear that certain types of patients could not be admitted to such units. Some of these can only be admitted to very small heavily staffed establishments such as those run by the Society of St. Bernadette, the remainder need the specialised services of a hospital.

In 1962 the County assisted the Cheshire Foundation and the W.V.S. to establish hostels for the ex-mentally ill and confused elderly patients respectively. During the last year both the Cheshire Foundation and the Society of St. Bernadette received financial support from the County Council. With regard to both of these hostels, the County Council pursued its previous policy of granting financial aid up to 50 per cent of the costs involved in return for an option on a percentage of beds. By the end of the year the position as far as beds in hostels run by County aided voluntary associations was as follows :—

<i>Home.</i>	<i>Organisation.</i>	<i>No. of Patients.</i>	<i>County Beds.</i>
Confused elderly	W.V.S.	18	10
Ex-mentally ill	Cheshire Foundation	18	9
Ex-mentally ill	Cheshire Foundation	15	8
Subnormal children	Society of St. Bernadette	10-11	6
Subnormal children	Society of St. Bernadette	6	

Mental Nursing Homes.

The following Mental Nursing Homes have been registered by the County in accordance with Section 15 of the Mental Health Act, 1959, and are visited regularly by the County's authorised officers.

<i>Home.</i>	<i>Organisation or Owner.</i>	<i>Number and Category of Patients.</i>
26, The Drive, Coulsdon	St. Bernadette's Schools Ltd.	12 subnormal or severely subnormal female children.
Lourdes House, Stanley Park Road, Wallington		5 subnormal or severely subnormal female children.
St. Teresa's Convent, Great Holt, Dockenfield	Sisters of the Sacred Heart of Jesus and Mary	127 subnormal female adults.
The Grange, Hindhead	Mrs. A. M. Scudder	25 severely subnormal male and female children under the age of 7 years.
Tyrwhitt House, Oaklawn Road, Leatherhead	Ex-Services Mental Welfare Society	27 mentally ill adults.

Homes for the Mentally Disordered.

The following Homes have been registered by the County in accordance with Section 37 of the National Assistance Act and Section 19 of the Mental Health Act.

<i>Home.</i>	<i>Organisation or Owner.</i>	<i>Number and Category of Patients.</i>
Gaywood, 30, The Downs, Wimbledon, S.W.19	The Cheshire Foundation Homes for the Sick	18 male or female adults ex-mentally ill.
Miraflores, Worple Road, Wimbledon, S.W.19	Ditto	15 male or female adults ex-mentally ill.
The Hill House, Portsmouth Road, Esher	Mental After Care Association	30 male and 5 female adults ex-mentally ill.
31, York Road, Cheam	Ditto	25 female adults ex-mentally ill.
6, Alcester Road, Wallington	Mr. and Mrs. S. G. Robinson	12 male adults subnormal.
Milner House, Ermyn Way, Leatherhead	Ex-Services Mental Welfare Society	29 male adults ex-mentally ill.
Kingswood Grange, Lower Kingswood	Ditto	20 male adults ex-mentally ill.

Homes for the Mentally Disordered—continued.

<i>Home.</i>	<i>Organisation or Owner.</i>	<i>Number and Category of Patient.</i>
The Meadows, Betchworth	Mrs. Rhoades	10 female adults subnormal.
Woodbury, Kingsdowne Road, Surbiton	W.V.S.	17 females (confused elderly).

Social Clubs and Day Centres.

The following clubs and day centres have been established in the County and the County Council contribute towards the running costs.

<i>Club or Centre.</i>	<i>Organisation.</i>	<i>Type of Patient.</i>
Rendezvous Club, Wimbledon	Wimbledon Guild of Social Welfare	Ex-mentally ill.
Handshake Club, 44, Waterloo Road, Epsom	Epsom League of Friends for Mental Health	Ex-mentally ill and subnormal.
Fortyfoot Road, Leatherhead (Club)	Epsom and Leatherhead District Society for Mentally Handicapped Children	Subnormal and severely subnormal children and adults.
Peter Pan Club, Alexandra Hall, S.W.14	Richmond and Barnes District Society for Mentally Handicapped Children	Both temporary Special Care Units for subnormal and severely subnormal children and adults.
Morden Assembly Hall, Lower Morden	Wimbledon and District Society for Mentally Handicapped Children	

Training Centres.

In consequence of the delay already referred to with the two new training centres at Caterham and Ham and the special care unit at Morden, the temporary special care units run by the Richmond and Barnes and Wimbledon branches of the National Society for Mentally Handicapped Children continued to provide a very valuable service. The Wimbledon unit, which opened in 1962, expanded greatly during 1963 and the Council increased its grant towards the cost of additional staff.

Whilst the necessary building work to provide a special care unit at the Council's Guildford unit had not yet commenced, part of the need continues to be met by the provision of a special group within the centre.

The development of the Adult Technical Units probably gives rise to the greatest satisfaction. Although the majority of trainees attending the units are severely subnormal, and some have severe physical handicaps, they operate a variety of machines, from simple hand operated presses to electrically powered drilling machines and capstan lathes. There has been a steady increase in the number of well paid industrial contracts undertaken at the units and the training which these afford the trainees has developed the confidence, ability and maturity of the trainees to such an extent that several of them will soon be ready for employment in selected places in open industry. One very welcome development is the relationship between one factory and the Centre. For Christmas 1962 the staff of the factory gave the Centre an expensive record player and records. During the year the owner has arranged and paid for a summer outing to the coast and later in the year a visit to the pantomime for all the trainees at the Centre. At Christmas he gave the Centre a television set. Every time the Centre Supervisor has visited the factory he has been accompanied by a trainee. This has done much to familiarise the workers with the appearance and characteristics of the mentally subnormal.

Home Teacher.

Late in the year a home teacher was appointed on an experimental basis to ascertain whether this method of tuition would prove valuable in providing a service for those patients unable to be admitted to the training centres. It is envisaged that the case load will not exceed 10 of whom 2 or 3 will be psychotic children whilst a similar number will be those awaiting entry to special care units. Until more is known about the correct case loading the remainder of the cases will be those awaiting entry to the training centres. The officer is enthusiastic and the early indications are that this may prove a valuable method of dealing with autistic children. The home teacher held a Christmas party at her own home for children receiving home tuition, and all children had an enjoyable time.

Training of Staff.

As the service expands the considerable shortage of suitably trained staff becomes more and more apparent. However, the Council were fortunate in that four university trained and qualified social workers were recruited during the year. Most of these came straight from university and following a short period of in-service guidance were soon fully employed. The psychiatric social

work organiser was appointed during the year, a long interval having elapsed since his predecessor's resignation.

Late in the year the 2 social workers seconded to the Mental Health Course qualified and returned to take up their duties as psychiatric social workers. In addition to their own case work they advise social workers and mental welfare officers on their case work problems. The Mental Welfare Officer seconded to the Younghusband Course in 1961 was also successful in his examinations and has recommenced his duties. During the year a further health visitor has received in-service training and is now engaged full-time assisting a similarly trained officer in providing intensive social work care to subnormal and severely subnormal patients. They are assisted by a qualified social worker who provides care for those patients who are both subnormal and mentally ill. An increase in the establishment is envisaged for 1964.

These increases in trained staff only accentuate the urgent need to provide adequate office accommodation. It is anticipated that during 1964 the Council will be able to implement its policy of providing personal rooms for psychiatric social workers; adequate numbers of interview rooms for social workers and mental welfare officers; and clerical assistance for all officers.

In 1962 two trainee assistant supervisors were appointed. During 1963 it was apparent that one, due to previous experience, was ready for secondment to the N.A.M.H. Course. She was fortunate in obtaining a place. The other declared her intention of getting married and leaving the district and therefore relinquished her appointment as a trainee. There was an increase in the establishment of 2 trainees and with replacements there are now 4 first-year trainees and no second-year trainees.

The Council have also seconded and sponsored 2 unqualified assistant supervisors to take the N.A.M.H. Course.

Approval of Medical Practitioners.

Six medical practitioners were approved during the year for the purposes of Section 28 of the Mental Health Act, 1959, and at the end of the year a total of 126 approvals had been given by the County Council.

Number of Patients awaiting entry to hospital, or admitted for temporary residential care during 1963

	Mentally Ill.				Psychopathic.				Subnormal.				Severely Subnormal.				Totals.				Grand Total.
	Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		Under age 16		16 and over		
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)	(18)	(19)	(20)		(21)
1. Number of patients in L.H.A. area on waiting list for admission to hospital at 31.12.63—																					
(a) In urgent need of hospital care...	—	—	—	—	—	—	—	1	—	—	—	—	4	1	—	3	5	1	—	3	9
(b) Not in urgent need of hospital care	—	—	—	—	—	—	—	2	3	5	2	23	9	12	17	25	12	17	19	73	
(c) Total	—	—	—	—	—	—	—	3	3	5	2	27	10	12	20	30	13	17	22	82	
2. Number of admissions for temporary residential care (e.g. to relieve the family)—																					
(a) To N.H.S. hospitals	—	—	—	—	—	—	—	2	2	2	—	11	10	6	9	13	12	8	9	41	
(b) To L.A. residential accommodation	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	1	
(c) Elsewhere	—	—	—	2	—	—	—	—	—	—	—	2	—	—	—	—	—	—	—	4	
(d) Total	—	—	—	2	—	—	—	2	2	2	2	12	10	6	9	14	12	8	13	46	

Report of the L.H.A. Area Youth Health Survey at 31.12.63

NURSING HOMES.

Nursing Homes Act, 1963.

Under this Act the Minister of Health has made Regulations for the Conduct of Nursing Homes. These came into force on 27th August, 1963. A comprehensive review of the standards at existing registered Nursing Homes was commenced in the autumn of 1963 in the light of the wider powers given to the Authority under the Regulations and the attention of the Managers is being drawn, where necessary, to the need for bringing up their Homes to the standard, including fire precautions, which it is considered will satisfy the requirements of the Regulations. Voluntary Homes and Institutions previously exempted annually from registration ceased to be so exempted after the 15th May, 1964.

During the year the Committee approved the registration, or alteration in registration of one nursing home. On the 31st December, 1963, there remained 42 registered nursing homes and 16 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 1963 the following number of premises and of persons had been registered:—

	Number registered at 31.12.1963.	Number of children provided for.
Premises	135	2,910
Daily Minders	337	3,255

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 districts 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 31st December, 1956. In 1960, one smoke control area commenced to operate in Richmond and in 1961 three commenced to operate in the Boroughs of Barnes and Beddington and Wallington, and in the Urban District of Carshalton. In 1962 an additional ten commenced to operate. These consisted of a second area in each of the Boroughs of Barnes and Beddington and Wallington, two further areas in the Borough of Richmond, and two areas in each of the Boroughs of Kingston-upon-Thames, Malden and Coombe and the Urban District of Merton and Morden. Ten smoke control areas commenced to operate during 1963 as follows. A third area in each of the Boroughs of Barnes, Beddington and Wallington, Kingston-upon-Thames, Malden and Coombe and the Urban District of Merton and Morden and a second and third area in the Urban District of Carshalton. The first control orders commenced to operate in the Boroughs of Mitcham and Wimbledon and the fourth control area in the Borough of Richmond. There was, therefore, a total number of twenty-four smoke control areas operating in the County at the 31st December, 1963.

Since my last Report, ten 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. 4 Order	1st Sept., 1964	Incorporating the triangle of property lying in the south-east corner of the borough and adjoining the No. 4 smoke control area of the Metropolitan Borough of Wandsworth. This area is bounded on the north by the Upper Richmond Road, S.W.15, and on the north-west by Queens Rise and on the east by the borough boundary.	186	

	Proposed date of commencement.	Site.	Number of dwellings.	Remarks.
Barnes No. 5 Order	1st Dec., 1964	Bounded by railway line from Barnes Bridge to Barnes Station (Area No. 3 boundary line) following railway line from Barnes Station to Mortlake Station—then follows boundary of Sheen Lane to the river but due to forecast developments excluding Watney's Brewery.	1,831	
Beddington and Wallington No. 4 Order	1st Oct., 1964	Bounded by centre of Woodcote Road between Stafford Road and Heathdene Road and the centre of Boundary Road. The Sutton and West Croydon Railway, the centre of Desmesne Road (between Railway and Stafford Road) and the centre of Stafford Road (between Desmesne Road and Woodcote Road).	823	
Carshalton No. 4 Order	1st Oct., 1964	Bounded on the north by centre of Thornton Road and by a line along the rear of the houses on the north side of Westminster Road, on the west by the boundary with the borough of Sutton and Cheam as far south as a point opposite the junction of Wrythe Lane, on the south by a line along the centre of Wrythe Lane to Muschamp Road and along the centre of Muschamp Road to its junction with Green Wrythe Lane and on the east by the centre of Green Wrythe Lane to its junction with Thornton Road.	1,760	By 1971 all domestic premises in the district will be affected, approximately 17,600 in all.
Kingston-upon-Thames No. 4 Order	1st Oct., 1964	Bounded by a line commencing at a point in the south-east from the municipal boundary at the junction of Lingfield Avenue with Villiers Avenue, then proceeding south-westward along the boundary to Queens Promenade then northwards to join up with the southern boundary of existing control areas—along Grove Crescent, then along a line south of Grove Lane to the point of commencement.	1,151	

	Proposed date of commencement.	Site.	Number of dwellings.	Remarks.
Malden and Coombe No. 4 Order	1st Oct., 1964	Bounded on the southern side of Malden Way, Beverley Brook on the north-eastern boundary, the railway line (Motspur Park to Malden Manor) and the eastern side of Malden Road.	905	Part of Norbiton (No. 1 order) will be dealt with by 1st October, 1965. This estate is to be smoke controlled earlier than originally planned. The domestic premises in the borough will be affected by 1972.
Merton and Morden No. 4 Order	1st Oct., 1964	Consists of that part of West Barnes Lane lying to the west of the Wimbledon — Epsom Railway.	1,099	
Merton and Morden No. 5 Order	1st Oct., 1964	The area bounded by Coombe Lane, West Barnes Lane, the Pyl and Beverley Brooks.	579	
Mitcham No. 2 Order	1st Nov., 1964	Area bounded by the centre of Carshalton Road, Cedars Avenue, Tamworth Lane, Sherwood Park Road, South Lodge Avenue and the borough boundary.	2,146	
Richmond No. 5 Order	1st Oct., 1964	The area is enclosed by Queens Road, Sheen Road, Alton Road, Larkfield Road, Lower Mortlake Road, Parkshot, Sheen Road, Church Road and Marlborough Road.	2,304	
Sutton and Cheam No. 1 Order	1st Oct., 1964	Consists of 307 acres enclosed by the borough boundary line commencing at the Pyl Brook, along Stonecot Hill, Epsom Road, Elm Road West, Sutton Common Recreation Ground, Morden Way, Wimbledon branch railway, to Reigate Avenue Railway Bridge along the north side of Reigate Avenue and Oldfields Road to Pyl Brook. Then continuing northerly along the Pyl Brook perimeter of the Sutton Sewage disposal works to Stonecot Hill.	1,784	

	Proposed date of commencement.	Site.	Number of dwellings.	Remarks.
Sutton and Cheam No. 2 Order	1st Oct., 1964	Consists of 211 acres enclosed by the borough boundary line commencing from London Road between Garth Road and Trafalgar Avenue, along a line north-east of Trafalgar Avenue, Charnminster Road, Conrad Drive, Boscombe Road, Worcester Park sewage works to Green Lane. Then along Green Lane borough boundary to the north side of Longfellow Road—along the north-east side of, but excluding Longfellow Road, Browning Avenue, Lindsay Road, Ruskin Drive, Ebbisham Road, Colborne Way, Burnham Drive and Glyn Road. Then along and including the north-west side of London Road from Glyn Road to Trafalgar Avenue.	904	No. 3 area is now being surveyed. This comprises approximately 100 acres and 1,261 dwellings.
Wimbledon No. 3 Order	1st Oct., 1964	North-west boundary proceeds along South Side to the south side of Woodhayes Road. Western boundary proceeds along east side of Woodhayes Road, part of north side of Ridgway, Lansdowne Road, Crescent Road, Delamere Road—part of north side of railway line. Southern boundary proceeds along Wimbledon and Merton boundary. Eastern boundary consists of part of Merton Hall Road, Elm Grove, Thornton Hill, Clifton Road and Hillside.	1,673	
Wimbledon No. 4 Order	1st Dec., 1964	Eastern boundary—Wimbledon and Malden and Coombe boundary. Northern boundary consists of borough of Wimbledon and Wandsworth. Western boundary proceeds along east side of Parkside, including The Green. North-east boundary proceeds along north side of South Side—part of north side of Woodhayes Road. The north-west boundary consists of the boundary of Royal Wimbledon Golf Course and continues to Beverley Brook.	330	

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. Other smoke control areas have not been set up, however, as the Council feel that it is pointless to introduce smoke control areas until the steam trains which at present use the engine sheds in the town centre have been replaced. The Esher Urban District operate two volumetric stations for the measurement of smoke and sulphur acids in the air. During the year Chertsey Urban District decided that two stations should be set up for measuring the extent of atmospheric pollution and the first of their stations is expected to be operating very shortly.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

The following applications from Local Authorities and from a Water Board for the Council's observations to the Ministry of Housing and Local Government under Section 2 (2) of the Act were received during 1963 and reported to the Rivers and Streams Committee :—

Authority.	Scheme.	Estimated Cost.	Committee Decision.
		£	
Bagshot R.D.C. ...	Main Drainage—Chobham and Bisley— The Fenns Lane—Brentmoor Road, Extension ...	48,500	Schemes approved in principle.
	Streets Heath — Common Fields, Extension ...	16,490	
	The Queens Road, Bisley ...	1,025	
Dorking & Horley R.D.C.	Sewerage—Lowfield Heath ...	21,150	Scheme approved in principle.
Dorking & Horley R.D.C.	Sewerage—Balcombe Road (Black Corner—Antland Lane)	17,490	Scheme approved in principle subject to grant being based on a maximum cost of £400 per property.
Egham U.D.C. ...	Sewerage—Wentworth Estate	65,000	Scheme approved in principle but District Council asked to obtain contribution from owners of property. Grant aid subsequently refused by Ministry.
Godstone R.D.C. ...	Sewerage—Lone Oak, Smallfield, Extension	2,850	Scheme approved in principle.
Godstone R.D.C. ...	Sewerage—Pollards Wood Road, Limpsfield, Extension	2,025	Scheme approved in principle.
Godstone R.D.C. ...	Sewerage—Tatsfield (Stage 2) ...	34,400	Scheme approved in principle.
Godstone R.D.C. ...	Sewerage—Nutfield and Burstow	248,500	Scheme approved in principle.
Hambledon R.D.C. ...	Sewerage — Clappers Meadow Housing Estate, Alfold	2,485	Scheme approved in principle.
Hambledon R.D.C. ...	Sewerage—Guildford Road, Cranleigh	2,630	Scheme approved in principle.
Dorking & Horley R.D.C.	Water Supply — Friday Street, Wotton	4,642	Scheme approved in principle.
Guildford, Godalming and District Water Board	Water Supply — Netley Mill Development	361,800	Matter referred to Ministry who subsequently refused grant aid.

REFUSE DISPOSAL.

No new applications under Section 94 of the Surrey County Council Act, 1931, were received during the year.

Five renewals were granted. Three of the existing refuse tips ceased to operate during the course of the year. The total number of approved refuse dumps in the County is seventeen and all are conducted satisfactorily.

MILK AND DAIRIES.

The Milk (Special Designation) Regulations, 1960-63.

The County Council continue to be responsible for granting dealers' licences, except for a few kinds which are granted by the Minister of Agriculture, Fisheries and Food, to all premises 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 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.

The Milk (Special Designation) Regulations, 1963, came into operation with regard to certain provisions on 29th September, 1963, other provisions will come into force on 1st June, 1964, and the operative date in all other respects will be 1st October, 1964. The Regulations re-enact with amendments the Milk (Special Designation) Regulations, 1960. These provide that from 29th September, 1963, until 31st December, 1964, milk which has been pasteurised under licence in accordance with the Regulations may be sold as either "Pasteurised Milk" or "Tuberculin Tested Milk (Pasteurised)." Licences to use the special designations "Pasteurised" or "Sterilised" issued under the Milk (Special Designation) Regulations, 1960, and in force immediately before 1st October, 1964, are continued in force as though they were granted under the new Regulations. The other main change affecting the Council will not come into force until 1st October, 1964, when "Untreated" will replace "Tuberculin Tested" as the special designation for raw milk.

Arrangements whereby County District Authorities within the area for which the County Council is the Food and Drugs Authority, allowed their Public Health Inspectors to carry out the inspection and sampling work in connection with the Regulations as agents of the County Council continued throughout the year under the existing working and financial arrangements. They have continued to give valuable co-operation and their activities in this respect which are co-ordinated by the County Medical Officer are much appreciated. The number of County District Authorities involved is ten.

One hundred and twelve new applications for different types of pre-packed milk licences were received and approved during the year. Seventeen of these related to requests for licences of a particular designation to be transferred to a new licensee. A further seventeen licences were relinquished during the year. No applications were received during the year relating to pasteurising or sterilising establishments and the number of pasteurising establishments operating at the end of 1963 remained at five.

The following table shows the number of different types of dealers' licences which have been issued from 1st January, 1961, onwards and which were still in force on 31st December, 1963, in the districts for which the County Council is the Food and Drugs Authority:—

<i>Type of Licence.</i>	<i>Number in force on 31st December, 1963.</i>
Dealers' (Pasteurised) Licences	5
Dealers' (Tuberculin Tested) Licences	8
Dealers' (Pre-packed Milk) Licences—Tuberculin Tested	134
Dealers' (Pre-packed Milk) Licences—Pasteurised	174
Dealers' (Pre-packed Milk) Licences—Sterilised	109
	<hr/> 430

The results of sampling during 1963 in the districts concerned are as follows:—

SAMPLING IN RESPECT OF DEALERS' LICENCES.

	<i>Pasteurised.</i>	<i>Sterilised.</i>	<i>Tuberculin Tested. (Pasteurised.)</i>	<i>Tuberculin Tested. (Raw.)</i>
Number of milk samples taken	318	133	324	120
Failed phosphatase test	1	—	—	—
Failed methylene blue test	2	—	14	31
Failed turbidity test	—	—	—	—

Once again the highest proportion of sample failures occurred amongst methylene blue tests carried out in respect of Tuberculin Tested (Raw) Milk. In view of the high number an analysis of the thirty-one sample failures were made and details are given below:—

<i>Cause of Failure.</i>	<i>No. of Tuberculin Tested (Raw) Milk Sample Failures.</i>
Technical faults	14
Age of milk when sampled	9
Reason for failure not determined	8
	<hr/> 31

As will be seen from the results of samples shown in the following table, a high standard of performance was maintained at the pasteurising plants in the districts for which the County Council is the Food and Drugs Authority. The only failure related to a phosphatase test and this was found to be due to faulty working of the forward-flow and diversion mechanism of a pasteurising plant which had been installed a few months previously. The fault was rectified after consultation with the manufacturers.

SAMPLING AT PASTEURISING ESTABLISHMENTS.

	<i>Pasteurised.</i>	<i>Tuberculin-Tested. (Pasteurised).</i>
Number of milk samples taken	251	7
Failed phosphatase test	1	—
Failed methylene blue test	—	—

Tubercle Infected Milk.

No notifications of milk produced at farms in Surrey having been found to be infected with tubercle bacillus were received during 1963. 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 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 animals proving to be tuberculous, however slight, slaughtered, is 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.

General.

The County Council is the Food and Drugs Authority for ten of the thirty-three County Districts in the Administrative County and the following table gives particulars of samples taken during 1963 within the Council's Food and Drugs area for examination by the Public Analyst, or for misdescription or irregularities with regard to labelling. Comparative figures for 1961 and 1962 are also given :—

	Milk.			Food other than milk.			Drugs.			Totals.		
	1963	1962	1961	1963	1962	1961	1963	1962	1961	1963	1962	1961
Examined	620	591	710	217	229	251	24	7	11	861	827	972
Adulterated or Irregular ...	9	4	19	15	20	31	2	—	1	26	24	51
Percentage Adulterated or Irregular	1.45	0.67	2.67	5.55	8.73	12.35	8.33	—	9.09	3.02	2.90	5.24
Samples per 1,000 of average annual population ...	1.96	1.90	2.08	0.69	0.73	0.72	0.07	0.02	0.03	2.72	2.66	2.81

Estimated Population.

Mid-Year, 1963	316,590
Mid-Year, 1962	310,890
Census, 1961	345,396

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 78 varieties of food and 16 different drugs formed the total of 861 samples taken, which fell just short of the target figure of 3 samples per 1,000 of the estimated population in the Council's Food and Drugs area.

Milk.

A total of 620 milk samples were taken and nine were found to be adulterated or irregular. Analysis of one of these samples retailed by a dairy farmer showed that it contained 14 per cent added water. Two samples were below the presumptive minimum of 3 per cent milk fat and three samples of Channel Islands Milk were below the standard of 4 per cent milk fat. The remaining three samples were retailed in dirty bottles.

It is undesirable that milk containing antibiotics should be sold for human consumption because injurious consequences are likely to be suffered by a limited number of people who are, or may become, sensitive to antibiotics. Some samples of milk were therefore subjected to test for the presence of antibiotics, with generally satisfactory results.

Sausages.

Although there is still no prescribed standard for the meat content of pork and beef sausages, the six samples taken during the year conformed to the recommended standard of 65 per cent and 50 per cent for pork and beef sausages, respectively.

Unsound or Otherwise Irregular Food.

Nine incidents were reported, involving various foodstuffs during the year.

False or Misleading Labels.

Six incidents were dealt with under this heading.

Food Contaminated by Pesticides.

In order to attempt to discover the effect upon consumers of fruit and vegetables sprayed with

many of the newer pesticides, 39 samples were submitted to the Public Analyst. These samples were of British and foreign origin and consisted of:—

Apples	Cauliflower	Pears
Beans	Lettuce	Plums
Brussels Sprouts	Peaches	Potatoes
Cabbage	Peas	Tomatoes
Capsicum (green pepper)		

None of the samples was reported to contain pesticide residue.

New Legislation.

THE SOFT DRINKS REGULATIONS, 1963.

In May last revised Regulations regarding Soft Drinks were approved by Parliament and come into operation on 1st July, 1964. The principal changes are:—

The standards of composition for soft drinks made from citrus fruit or the juice of citrus fruit have been revised and in the case of comminuted drinks the regulations have been extended to cover all citrus fruits.

Labelling provisions are laid down for all soft drinks made from citrus fruit or the juice of citrus fruit.

Pictorial devices suggestive of fruit on the labels of flavoured carbonated drinks are prohibited and if the labels contain any word suggestive of fruit a specified labelling provision is prescribed.

The minimum sugar requirements for soft drinks have been increased and the maximum permitted quantity of saccharin has been reduced.

The labels of soft drinks containing saccharin must carry a specific declaration.

The acids permitted for use in soft drinks are specified.

The regulations apply to all retail sales of soft drinks in containers but do not apply to sales in unclosed drinking vessels.

All letters and words required to be used on labels must conform to specified requirements as to size and colour.

The Liquid Egg (Pasteurisation) Regulations, 1963.

These Regulations, which came into force on the 1st January, 1964, require that bulked liquid or frozen egg is pasteurised before being used in the preparation of food for sale for human consumption. An exception is made for shell eggs broken out on the food manufacturer's premises and used within 24 hours. The Regulations prescribe the method of pasteurisation and the test to be satisfied, and prohibit the importation of unpasteurised liquid or frozen egg.

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 1963 was 2,652 compared with 2,702 at the end of 1962.

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, 1963.

Age Group.	NEW CASES REGISTERED DURING YEAR.			TOTAL REGISTERED BLIND PERSONS.		
	Male.	Female.	Total.	Male.	Female.	Total.
Under 1	—	—	—	—	—	—
1...	—	1	1	—	1	1
2...	—	—	—	—	—	—
3...	1	—	1	1	—	1
4...	—	—	—	1	—	1
5—10	—	1	1	17	5	22
11—15	—	—	—	14	11	25
16—20	—	1	1	17	15	32
21—29	3	1	4	26	21	47
30—39	1	1	2	64	37	101
40—49	5	2	7	92	67	159
50—59	8	13	21	135	133	268
60—64	3	14	17	71	99	170
65—69	10	18	28	95	149	244
70—79	36	66	102	207	421	628
80—84	15	39	54	125	287	412
85—89	18	40	58	73	265	338
90 and over	4	8	12	35	168	203
Unknown	—	—	—	—	—	—
	104	205	309	973	1,679	2,652

In addition to the Register of Blind Persons, a Register of Partially Sighted Persons is maintained and these number 543 as compared with 517 at the end of 1962.

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 502 forms were received relating to new cases and re-examinations as compared with 485 during 1962.

HOME TEACHERS FOR THE BLIND.

The complement of sixteen Home Teachers remained unchanged.

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, 24,419 such visits were made this year. Eleven handicraft classes functioned during the year and Social Clubs now number twenty-one. 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, REHABILITATION, TRAINING AND EMPLOYMENT.

Education.

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 3 blind children of under school age remained at home. Of the 47 blind children of school age, 27 attended schools for the blind, 4 were not at school and 16 were ineducable.

Capitation fees are paid by the County Council to the National Library for the Blind in respect of 233 blind persons who are supplied with Braille or Moon Type Books.

Rehabilitation.

Rehabilitation for the purposes of employment is the responsibility of the Ministry of Labour, but the County Council assists blind persons to obtain social rehabilitation at the residential centres maintained by the Royal National Institute for the Blind.

A new service, domiciliary rehabilitation, for those who for domestic or personal reasons are unable to attend the residential centres, was projected to start in January 1964. One specially trained home teacher is occupied full time in rehabilitating blind persons in their own homes.

Training and Employment.

As from 1st October, 1963 the Ministry of Labour became responsible for the training and the placement of blind persons in employment. The County Council's agency agreement with the Royal National Institute for the Blind which had hitherto covered this service was therefore terminated by mutual consent. The Institute will, however, continue to help and advise on commercial and professional work.

Of 345 blind persons available for employment 337 were employed and 8 were unemployed.

Workshops for the Blind and Home Workers' Scheme.

There are at present 20 blind persons employed in Workshops for the Blind, and the County Council continues to pay augmentation 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.

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, 1963, the Royal Association in Aid of the Deaf and Dumb, at their request, ceased to act as the Council's Agents and, as a consequence, the Association's Welfare Worker was transferred to the Council's staff. A second Welfare Officer was appointed in September and the two officers have made an excellent start in providing a direct service to the deaf. Close relations are maintained with the Royal Association and other voluntary bodies.

The Welfare Officers' principal duties consist of home visits when they deal with problems of the deaf, especially the deaf without speech. These problems cover the whole range of human affairs and Welfare Officers are responsible for bringing the deaf in touch with services required by them. The deaf tend to be an isolated community and it is the duty of the Welfare Officer to help in breaking down barriers by friendly contact and by interpreting for their patients.

In 1963 a Youth Club for the deaf was started in Guildford. Two social clubs, one in Guildford and the other in Surbiton, were regularly attended by the Welfare Officers, in addition to the Youth Club.

As an experiment regular social evenings were held in one of the mental hospitals in 1963 for deaf patients. This was a success and, with the co-operation of the hospital staff concerned, arrangements were made for the extension of the scheme to other hospitals. Both the Welfare Officers attend at all these functions.

The Middlesex and Surrey League for the Hard of Hearing remain the Council's agents in respect of those persons who have hearing difficulties.

The League has 15 groups in the County; their activities include social meetings, lip reading instruction, training in clear speech, giving advice on the fitting and maintenance of hearing aids and the transport of old and infirm members. There is a youth section.

In November, 1963, approval was given to the appointment, in 1964-65, of an Audiometrician/Hearing Aid Technician to visit homes for old people provided by the Council and voluntary organisations.

Residents will be tested by the Audiometrician for loss of hearing and those residents who show a significant loss of hearing will be referred for examination to the General Practitioner to the home, and, on his recommendation, will be sent to an Ear, Nose and Throat Consultant at a Hearing Aid Centre. It is expected that many old people who, hitherto, have been unsuspected cases of hard of hearing, will receive hearing aids by this means. These cases will all be followed-up by the Audiometrician.

The Audiometrician will also test aids already in the possession of old people and her advice on the use of the aids will be available.

On 31st December, 1963, the Register of the Deaf was made up as follows:—

			Male.	Female.	Totals.
Deaf without Speech	...	...	258	187	445
Deaf with Speech	...	...	61	68	129
Hard of Hearing	...	...	200	466	666
Totals	...	...	519	721	1,240

Other Handicapped Persons.

The Council's scheme for handicapped persons, other than the blind, partially sighted and deaf or dumb, continued to be administered during 1963 by the Council and by the Voluntary Association for Surrey Disabled, who are the Council's agents.

During 1963 the field staff of two Social Workers was increased by one. One Welfare Assistant was also appointed. These officers were under great pressure and, in October, 1963, the average case load per Social Worker was 304. This was too heavy, comparing unfavourably with the maximum of 100 as recommended by the Younghusband Report in 1959, and an increase in staff for 1964 was agreed by the Committee.

The Council's services for handicapped persons were in great demand in 1963 and requests for aids, equipment and adaptations to homes were especially numerous. The numbers of applications approved were as follows:—

Aids and Equipment	...	...	...	234
Adaptations costing under £25	...	...	...	7
" " " £25-£100	...	...	...	8
" " " over £100	...	...	...	8

The range of aids was wide and included handrails, raised W.C. seats, bath seats, portable ramps, walking aids, commodes, lifting devices, hospital type beds, special mattresses, pick-up sticks, stocking pullers-on, etc.

Adaptations, which consist of any permanent alteration or addition to a house, included concrete ramping, ceiling tracking for hoists over beds and baths, ground floor W.C.s and bathrooms and "run-ins" to garages for invalid tricycles.

During 1963 a further 128 disabled drivers were provided with car badges designed to ease their

difficulties in finding suitable parking places. Since the inception of this scheme in 1961 625 drivers have received badges.

The Council are responsible for Occupational Therapy and maintain a team of full-time qualified Occupational Therapists and Technical Instructors under the direction of a Head Occupational Therapist. Their services are also available for the tuberculous (see page 51). They work closely with the Voluntary Association for Surrey Disabled and the Council's Social Workers for the Handicapped, District Nurses, etc., in providing the disabled with aids and equipment, and demands for this latter service greatly increased during the year.

During 1963 the Council sponsored the maintenance of a further 5 patients in centres for training and rehabilitation or in sheltered workshops. In all, 22 handicapped persons were at such institutions during the year at one time or another.

In November, 1963 the County Welfare Committee agreed that improved transport facilities for the conveyance of handicapped persons to and from organised recreational and social activities were necessary and provision was made for the purchase, in 1964-65, of five ambulance-type vehicles capable of carrying wheelchair and sitting cases. The vehicles will be operated by the Ambulance Service and the running costs will be met by the County Welfare Committee.

The Voluntary Association for Surrey Disabled organise, on behalf of the Council, handicraft classes, holidays and transport of the handicapped. The Voluntary Association and the Council work in close and harmonious co-operation.

On 31st December, 1963 the Register of "Other Handicapped" persons was made up as follows :—

			<i>Male.</i>	<i>Female.</i>	<i>Totals.</i>
Under 16	390	254	644
16-64	1,005	1,235	2,240
65 and over	279	524	803
Totals	<u>1,674</u>	<u>2,013</u>	<u>3,687</u>

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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 scheme of delegation of education functions to the Urban District of Woking came into operation on the 1st April, 1962.

The Registrar-General's estimated population of the Administrative County at mid-year 1963 was 1,502,330 which includes 205,600 children between the ages of 5-14 years inclusive. In January, 1964 there were 186,385 children on the registers of 670 county and voluntary schools, an increase of 2,144 in the number of children on the school registers compared with January, 1963.

MEDICAL INSPECTION.

Maintained schools.

Under the provisions 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 :—

	Age Groups.	Examination.
Primary	(i) On entry	Complete medical examination.
	(ii) During year in which age 8 is reached	
	(iii) On entry	Eye test only.
	(iv) During year in which age 13 is reached (if more than a year from last routine inspection)	
Secondary	(v) During year in which age 15 is reached	Complete medical examination.
	(vi) During year prior to leaving school (if more than one year after last routine inspection)	

The number of children examined in primary and secondary schools was 72,200 and 35,796 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 I.

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 charge.

DISEASES AND DEFECTS.

Incidence.

Of the 72,200 pupils examined at periodic medical inspections 9,534 (or 13.2 per cent) were found to be in need of treatment for 11,700 diseases and defects. Table IIA shows these diseases and defects from which it will be seen that 5,512 or 47.1 per cent of them were defects of the nose and throat and of vision and squint. During the year 605 cases of chronic tonsillitis and adenoids were recommended for treatment and 3,274 placed under observation.

There were 17,540 defects found to be in need of treatment in the course of periodic and special inspections in 1963, and 20,091 defects, a proportion of which were found in previous years, were actually treated during the year.

Medical re-examination and following-up.

During 1963 school medical officers carried out 11,467 special inspections and 10,840 re-inspections of children.

Physical condition.

Table IA shows the classification of the physical condition of pupils inspected in the periodic age groups under two categories—"satisfactory" (99.7 per cent) and "unsatisfactory" (0.3 per cent).

Personal hygiene.

For a further 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 1962 a reduction of 27,865 inspections. The number of individual children found to be infested, namely 690, was a slight increase over the previous year due largely to minor outbreaks of infestation at three schools in the Southern Division and at one new school in the South Eastern Division.

Figures for the five years 1959-1963 are given below :—

	1959	1960	1961	1962	1963
Number of visits to Schools by nurses for all purposes	11,165	9,969	8,305	7,129	6,074
Cases with nits in the hair	642	820	577	531	824
Cases with lice in the hair	117	64	54	75	97
Cases with verminous bodies	2	—	5	—	—

Eight 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 1963 was 5,721; the corresponding figure in 1962 was 6,137.

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 42 clinics throughout the County for the purpose of carrying out refractions and, where necessary, prescribing glasses.

Orthopaedic and postural defects.

Clinics staffed by sessionally employed orthopaedic surgeons were held in Guildford and Wimbledon. The following table shows the work carried out at these clinics during the year.

Name of Centre.	Number of sessions during year.	Number of children treated during 1963.	Number of attendances.	Number of new cases admitted.	Number of cases discharged.
Guildford, Stoke Road	7	105	130	59	37
Wimbledon, Pelham Road	11	77	122	32	30
Total	18	182	252	91	67

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 :—

Division.	Number of sessions during year.	Number of children treated during 1963.	Number of attendances.	Number of new cases admitted.	Number discharged.
North-Western	88	144	816	56	20
Central	406	356	1,923	219	83
North-Central	242	169	2,919	86	53
Southern	425	281	1,533	177	200
South-Eastern	636	433	5,584	230	130
Northern	221	224	1,709	164	89
South-Western	265	178	1,451	100	116
North-Eastern	243	193	2,706	102	101
Mid-Eastern	648	212	2,554	150	125
Woking U.D.C.	—	—	—	—	—
Total	3,174	2,190	21,195	1,284	917

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 1963, 226 children made 1,976 attendances for artificial sunlight treatment at school clinics.

Health visitors.

The arrangements made during 1961, 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, were continued in 1963. 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 still remains an important part of the health visitors' duties.

A. PART-TIME SCHOOL NURSES. SESSIONS WORKED IN 1963.

Division.	Preparation for Medical Inspection.	Medical Inspection.	General Medical Clinics.	Immunisation and Polio.	Other.	Total.
N.W. ...	—	204	294	69	50	617
C. ...	8	212	—	80	—	300
N.C. ...	28	156	191	—	37	412
S. ...	—	182	—	102	—	284
S.E. ...	87	133	79	65	306	670
N. ...	—	87	119	119	11	336
S.W. ...	—	246	174	79	112	611
N.E. ...	—	289	492	382	29	1,192
M.E. ...	20	61	379	101	135	696
Woking U.D. ...	28	87	150	—	—	265
Total ...	171	1,657	1,878	997	680	5,383

B. HEALTH VISITORS FIXED APPOINTMENTS IN 1963.

Division.	Preparation for Medical Inspection.	Medical Inspection.	General Medical Clinics.	Hygiene.	Teaching Sessions.	Other.	Total.
N.W. ...	239	288	55	106	7	233	928
C. ...	86	190	55	21	17	131	500
N.C. ...	185	266	147	70	10	106	784
S. ...	76	230	275	23	33	773	1,410
S.E. ...	107	166	—	33	6	125	437
N. ...	39	134	17	29	22	8	249
S.W. ...	112	400	14	52	101	—	678
N.E. ...	51	298	77	101	48	69	644
M.E. ...	112	268	44	53	9	85	571
Woking U.D. ...	98	145	54	26	20	95	438
TOTAL ...	1,105	2,385	738	514	273	1,625	6,640

SPECIAL FORMS OF TREATMENT.

Audiology service.

During the year the speech therapy and audiology services were combined into one unit with the County Audiologist as the medical officer clinically responsible for all cases. This integration has proved to be of great benefit having resulted in the peripatetic teachers of the deaf and the speech therapists working together and being aware of each other's problems. In addition, speech therapists have now a medical officer to whom they can refer cases directly. The early diagnosis of children with partial hearing presenting with speech difficulties is thus more easily made.

Clinics are held regularly throughout the County at which the audiologist (in the case of Purley, his deputy) and teachers of the deaf see children of all ages referred by medical officers, health visitors, general practitioners and paediatricians. At some clinics audiometricians and speech therapists also have sessions so that children can be seen by a team if necessary. It is hoped that the scope of these combined clinics will be increased.

A register of deaf children born since 1st January, 1958 has been started; all the families are known to the audiology service and the children are seen at home, at the school for the deaf at Portley House, at the partially hearing units at Ewell and Woking, and at ordinary schools. Fifty-nine

children are on this register and all of them wear hearing aids. The most common cause of deafness is maternal rubella in the early months of pregnancy (16 cases), followed by a group in which there is no known cause (14 cases). It is interesting to note that in the years the incidence of rubella deafness rises (children born in 1961, 1962) there is also a greater number of children deaf for no apparent reason. For example, in the years 1961-2 10 children were born deaf following maternal rubella and 6 born deaf from unknown causes; in the years 1959-60 there were 2 only in each group. It is possible, therefore, that in some children, in whom the aetiology of deafness is obscure, the cause may be maternal rubella, the disease not having been recognised in the mother. This is not surprising owing to the fleeting and trivial nature of the disease in adult life.

The Lingfield Hospital School for Epileptics was visited in 1963 and, at the request of the Medical Director, all the children were tested by an audiometrician. A total of 408 children were examined by a sweep technique; of these, 90 failed the test and were seen at the school by a teacher of the deaf and the audiologist after the audiometrician had carried out a full audiometric examination. Four children were found to have a bilateral deafness and were referred to an E.N.T. Surgeon (2 have since been recommended for hearing aids), and 7 had a unilateral deafness of a sufficient degree to warrant special position in class. It is hoped that new admissions to the school will be examined as a routine in the future.

The Moor House School for Speech Disorders has also been visited. Children suspected, or known to have, a hearing loss are seen at the school by a teacher of the deaf and the audiologist; the cases are discussed with Dr. Worster Drought (the Medical Director), the Principal of the School and the Senior Speech Therapist. Much of interest is learned at these case conferences on children with the double handicap of deafness and aphasia. Children with aphasia are also seen in order to establish without doubt that the hearing is normal.

The Surrey branch of the National Deaf Children's Society has been active during the year. Meetings are held quarterly; these are attended by the peripatetic teachers and the teachers from the partially hearing units and schools for the deaf as well as the parents of deaf children. The election of the audiologist to the committee of the Surrey branch has resulted in a closer contact between parents on the one hand and the County authorities on the other.

Routine audiometry of school children in the 6-7 years old age group has continued. This work is done by 3 audiometricians who visit the schools to give children a "sweep test," and to administer a detailed pure tone test to those who fail. School Medical Officers see these children and where necessary refer them to an Ear, Nose and Throat Specialist or to an audiology clinic. After much thought it was originally decided to undertake routine audiometry of all school children, rather than to confine the test to selected cases where a hearing loss is suspected or where it is important to establish whether the hearing is normal, as in backward children and those with emotional problems or requiring speech therapy. This decision has been justified; there is no doubt that routine testing does pick up children who have a significant hearing loss which was not suspected by either the parents or teachers. In particular, children with a severe, perhaps total, loss of hearing in one ear are discovered; with this kind of deafness positioning in class is most important, as a child badly placed with his deaf ear towards the teacher and the other children, owing to the teacher being unaware of the deafness, will definitely be handicapped and may easily become backward. Even though the number of children found with some degree of unsuspected deafness is small, the effort of routine audiometry is justified, as the consequences of a missed hearing loss may be disastrous to the individual child. With this in mind teachers and medical officers are encouraged to ask audiometricians to examine any child about whom they are concerned, whatever his age, even though previous audiometry was normal. This is an important part of the service as it may result in the detection of a deafness acquired later in childhood such as can follow an attack of measles, mumps or middle ear infection.

[illegible]

Name		Age		Sex		Marital Status		Occupation		Education		Religion		Political Party		Social Class		Income		Assets		Liabilities		Total		Remarks	
John Doe		35		Male		Married		Teacher		High School		Protestant		Republican		Middle Class		\$10,000		\$5,000		\$5,000		\$10,000		Good	
Jane Doe		30		Female		Married		Homemaker		High School		Protestant		Republican		Middle Class		\$10,000		\$5,000		\$5,000		\$10,000		Good	
John Smith		40		Male		Married		Engineer		College		Protestant		Republican		Upper Middle Class		\$20,000		\$10,000		\$10,000		\$20,000		Good	
Jane Smith		35		Female		Married		Teacher		College		Protestant		Republican		Upper Middle Class		\$20,000		\$10,000		\$10,000		\$20,000		Good	
John Brown		50		Male		Married		Farmer		High School		Protestant		Republican		Lower Middle Class		\$15,000		\$8,000		\$7,000		\$15,000		Good	
Jane Brown		45		Female		Married		Homemaker		High School		Protestant		Republican		Lower Middle Class		\$15,000		\$8,000		\$7,000		\$15,000		Good	
John White		60		Male		Married		Retired		College		Protestant		Republican		Upper Middle Class		\$25,000		\$12,000		\$13,000		\$25,000		Good	
Jane White		55		Female		Married		Homemaker		College		Protestant		Republican		Upper Middle Class		\$25,000		\$12,000		\$13,000		\$25,000		Good	
John Black		70		Male		Married		Retired		High School		Protestant		Republican		Lower Middle Class		\$18,000		\$9,000		\$9,000		\$18,000		Good	
Jane Black		65		Female		Married		Homemaker		High School		Protestant		Republican		Lower Middle Class		\$18,000		\$9,000		\$9,000		\$18,000		Good	
John Green		80		Male		Married		Retired		College		Protestant		Republican		Upper Middle Class		\$30,000		\$15,000		\$15,000		\$30,000		Good	
Jane Green		75		Female		Married		Homemaker		College		Protestant		Republican		Upper Middle Class		\$30,000		\$15,000		\$15,000		\$30,000		Good	

AUDIOLOGY SERVICE.

CHILDREN RECEIVING AUDITORY TRAINING DURING 1963.

Age.	Cases Carried over from 1962.	New Cases.	Discharged to		Left District.	Remaining Dec., 1963.	Total.
			Special School.	Supervision.			
0-2 years	3	15	—	1	1	16	18
2-5 "	22	10	6	1	4	21	32
5-7 "	14	9	7	4	2	10	23
7-11 "	10	10	7	5	1	7	20
11+ "	6	5	2	5	2	2	11
Total	55	49	22	16	10	56	104

CHILDREN UNDER SUPERVISION DURING 1963.

Age.	Cases Carried over from Previous Year.	New Cases.	Discharged.		Left District.	Remaining Dec., 1963.	Total.
			Special School.	No longer needing help or no longer at School.			
0-2 years	—	2	—	1	—	1	2
2-5 "	—	—	—	—	—	—	—
5-7 "	5	16	—	1	—	20	21
7-11 "	46	13	—	3	2	54	59
11+ "	60	20	1	6	3	70	80
Total	111	51	1	11	5	145	162

Child guidance service.

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.

Clinic.	Professional and clerical staff employed expressed as a proportion of full-time.				
	Psychiatrists.	Educational Psychologists.	Psychiatric Social Workers.	Psychotherapists.	Clerical.
Farnham	0.4	1.0	0.5	0.4	1.0
Godalming	0.4	1.0	0.5	0.4	1.0
Guildford	1.0	2.2	2.0	1.4	2.0
Chipstead	0.6	1.0	1.0	0.4	1.0
Reigate	0.6	1.0	1.0	0.6	1.0
Richmond	0.6	0.8	1.5	0.2	1.0
Malden	1.0	1.5	1.5	0.6	1.0
Sutton and Leatherhead	1.1	2.5	3.0	1.6	2.0
Wimbledon	0.6	1.0	1.0	0.5	1.0
Mitcham	0.6	1.0	1.0	0.4	1.0
Woking	0.6	2.0	2.0	0.5	2.0
Total equivalent full-time	7.5	15.0	15.0	7.0	14.0

The following table gives details of number of cases referred to and seen at clinics during the year.

Clinic.	Chislehurst	Farnham	Godalming	Guildford	Leatherhead	Malden	Mitcham	Reigate	Richmond	Sutton	Wimbledon	Woking	Total
No. of cases referred during year	78	58	46	175	38	174	51	106	83	191	112	120	1,232
No. of new cases seen	60	55	39	157	20	104	19	58	69	106	98	88	873
No. of cases discharged	49	73	25	99	17	31	37	17	97	84	81	37	647
Analysis :—													
(a) Treatment completed	20	36	10	40	11	3	13	13	41	30	30	21	268
(b) No treatment required	18	22	3	39	5	22	13	3	31	51	29	4	240
(c) Non-co-operation of parents ...	8	4	5	7	—	2	5	1	14	1	5	4	56
(d) Other arrangements made ...	3	11	7	13	1	4	6	—	11	2	17	8	83
No. of cases under treatment at end of year	26	37	22	46	—	23	24	14	12	39	39	25	307
No. of cases under supervision at end of year	17	15	20	198	21	251	11	143	62	45	158	60	1,001
No. of cases withdrawn from waiting list during year	13	18	12	16	22	76	17	18	28	77	11	18	326
No. of cases remaining on waiting list at end of year	22	13	12	24	10	75	38	63	7	39	18	36	357
No. of interviews by psychiatrists... ..	984	324	257	1,516	41	661	579	485	738	1,040	712	975	8,312
Analysis :—													
(a) With children for examination	86	50	47	238	21	168	19	73	200	165	127	96	1,290
(b) With children for treatment	723	174	155	474	—	207	527	346	232	600	539	638	4,615
(c) With parents	152	67	41	667	18	186	21	61	212	228	15	180	1,848
(d) With others	23	33	14	137	2	100	12	5	94	47	31	61	559
No. of sessions held :—													
(a) Psychiatrists	286	175	115	431	22	409	274	264	273	479	298	312	3,338
(b) Educational psychologists	464	390	458	884	51	625	458	308	416	350	418	562	5,384
(c) Psychotherapists	40	106	76	423	153	159	44	—	88	487	215	—	1,791
(d) Psychiatric social workers	290	135	185	631	114	556	33	367	627	1,230	506	124	4,798

The arrangement previously made to allow educational psychologists to devote half their time to the school psychological service and half to work in the child guidance clinics has continued. It creates a most useful link between the schools and clinics with considerable benefit to each.

It would appear appropriate under this section to report on the success of an appointment made initially in mid-1962, namely that of a Social Worker to the schools for maladjusted children. The social worker concerned is based at Guildford Child Guidance Clinic and visits the various schools regularly, as well as the parents of the children concerned. There is no doubt that this has been a most useful appointment which is appreciated both by the schools and the child guidance staff. The following report which she has submitted gives a general idea of the type of work carried out :—

"The work with the parents in their homes which has now been going on for 18 months, was begun in response to a need felt by the schools for a close liaison between staff and parents, and more detailed and up to the minute knowledge of family background and happenings than could be gained by occasional meetings at beginning and end of term between parents and headmasters or warden. The new-found awareness of day to day occurrences in the family has been most useful on occasion. For instance, one boy, who previously had been showing steady improvement came back after the holidays depressed, aggressive towards both adults and children and with a recurrence of all his symptoms. Nothing had been said to the school of any crisis at home, and the staff were wondering how best to help him, but during a home visit it gradually emerged that the boy's father had promised him, on the way home for the holiday, that he would, from thenceforward be at home for good. The father had had no intention of making his promise good, and no discussion had ever taken place about the possibility of the boy leaving at that time; but the effect of this broken promise had been catastrophic for the boy's recovery.

"In other cases it has been found that misunderstandings have been cleared away before they have reached the point of disturbing the child's relationship with his teachers, or the equally valuable relationship between teachers and parents.

"Another worthwhile aspect of the work has been the maintaining of links between a boy and his family. When a child has reached the point of leaving home, with the acquiescence of his parents, for a stay in a residential school or hostel for maladjusted children, he and his family have already gone through a long and often agonizing struggle to 'make a go of it.' There has been much hostility, resentment and bitterness on all sides, and the first reaction of parents is very often that of profound relief, swiftly followed by feelings of guilt and of failure. The child, too, often feels a certain relief from problems which he only dimly understands, but his feelings of guilt and resentment are strong

and he also feels bereft and valueless. There is a danger at this point that the link, which has already been strained to breaking point may break; the hole left by the child in the family pattern may be covered over, and the situation may arise, and often has arisen, that when a child is ready to go home, he is unable to do so, because his family is not able to tolerate the re-opening of painful wounds and has also learned to live without him.

"Also furthering the link between the child and his parents is the constant contact of the latter with someone, i.e. the social worker, who can tell them what the school is like, what the boys do in their spare time, and so on.

"A third link to be forged in this work with the families of maladjusted children, is between the child, his family and the child guidance clinic through which he was referred. It is seldom possible, owing to pressure of work, for the clinic psychiatric social worker to maintain the close contact with the family of the child that she had when he was attending the clinic. Other factors also enter into this, as for instance the fact that parents are reluctant to come to the clinic once the child has moved into the school—tensions have been lessened and there is no longer the excuse that the mother only comes to bring the child and to talk about his problems and not her own. Also, once the child ceases to attend the clinic, the clinic team no longer know him intimately and cannot therefore discuss his progress with the parents in such detail. However, should the child return home after a year or two in the residential school the child guidance clinic may take over again to help in the rehabilitation process. Apart, therefore, from the interest which the clinic has in the family, it is also necessary for it to be following its progress, and here the school social worker plays a useful part. My role, therefore, is threefold—as a link between school and family—child and family—and family and child guidance clinic. My work with the parents aims at helping them to gain new confidence in themselves as parents and to look at problems affecting themselves and their children in a new light, so that when they join together with their child as a complete family once more they too may have changed a little and so be more ready to make new and better relationships."

Speech therapy.

There were 57 Speech Clinics in operation at the end of the year at which a total of 140 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. New clinics were opened at Kingston, Acre Road and at Long Ditton by transfer of some sessions from Kingston, Grange Road and Cobham respectively. Owing to the difficulty in recruiting qualified speech therapists it was not possible to open the additional clinic at Oxted authorised by the Committee at the beginning of the year. Additional sessions were provided at Addlestone, Chipstead, Weybridge and Carew Manor Special School and one session was transferred from Hook to St. Philip's Special School. There were 2,258 individual children treated during the year compared with 2,206 in 1962, these were mainly for stammer, lisp and under-developed speech. Of these 379 were discharged as cured, 213 discharged as greatly improved, 125 discharged as showing some improvement and 68 as showing little or no improvement. A table showing the work of the Speech Therapists in 1963 is given at the end of this report.

The use of tape recorders in speech therapy proves a valuable aid to treatment. The standard model or a portable type is available at all clinics depending on whether the speech therapist is serving one or more clinics.

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 hearing.	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 1963, 1,963 Surrey pupils were attending special schools compared with 1,892 at the end of 1962.

The following table shows the number of Surrey children as at 31st December, 1963 who were ascertained as handicapped pupils and the provision made for their education :—

Category.	Total Handi- capped Pupils.		Disposal.																						
			Recommended Special School or Hostel.										Recom- mended to con- tinue under observation at Ordinary School.	Home Tuition.	Tuition in Hospital or Special Units.	Pending Recommendation									
			In Special School or Hostel.						Parents refuse consent.	On waiting list.	In Ordinary School.					At hom or in hospital or in Private School.									
			Pro- vided by Surrey.		Other.		Total.				In Ordinary School.					At hom or in hospital or in Private School.									
Blind ...	21	16	—	—	21	13	21	13	—	—	—	1	—	—	2	—	—	—	—	—	—	—	—	—	—
Partially sighted ...	41	27	—	—	23	15	23	15	—	—	—	1	12	5	1	—	—	—	5	3	—	—	—	—	3
Deaf ...	49	50	21	24	26	18	47	42	—	—	—	2	1	3	1	—	—	—	—	—	—	—	—	—	3
Partially hearing ...	120	107	13	11	17	15	30	26	1	—	4	—	69	71	—	—	—	—	8	3	8	7	—	—	—
Educationally sub-normal	1,181	698	549	327	67	31	616	358	28	18	134	92	272	164	5	3	—	—	101	48	25	15	—	—	—
Epileptic ...	37	30	—	—	14	11	14	11	2	1	—	—	4	2	1	—	—	—	8	12	8	4	—	—	—
Maladjusted ...	265	100	112	17	102	59	214	76	1	—	35	5	4	1	1	5	—	—	4	6	6	7	—	—	—
Physically handicapped	340	226	41	30	135	87	176	117	2	1	27	8	33	34	17	9	25	22	39	21	21	14	—	—	—
Delicate ...	205	133	50	20	52	35	102	55	6	11	10	4	12	11	4	2	12	17	56	28	3	5	—	—	—
Speech defect	7	4	—	—	4	3	4	3	—	—	2	—	—	—	—	—	—	—	1	1	—	—	—	—	—
Totals ...	2,266	1,391	786	429	461	287	1,247	716	40	31	212	113	407	291	30	21	37	39	222	122	71	58	—	—	—

Schools and hostels.

The following have been provided by the Education Committee :—

Handicap.	Name and Address of School/Hostel.	Accommodation.	Age Range.
Educationally Sub-normal	Barnes, St. Hilda's ...	50 M. Day	5-11
	Beddington, Carew Manor ...	140 M. Day	7-16
	Bramley, Gosden House ...	80 G. } Boarding	} G. 7-16 B. 7-10
		20 B. }	
		20 M. Day	
	Chessington, St. Philip's ...	130 M. Day	
	Leatherhead, West Hill ...	120 M. Day	7-16
	Mitcham, St. Christopher's ...	155 M. Day	7-16
	Redhill, St. Nicholas ...	100 B. Boarding	} 10-16
		20 B. Day	
	Woking, Park ...	170 M. Day	7-16
Delicate and physically handicapped	Guildford, Sunnydown ...	40 B. Boarding	10-16
	Kingston-upon-Thames, Bedelsford ...	72 M. Day (including spastic unit)	5-16
	Oxted, Limsfield Grange ...	38 M. Boarding	G. 5-16 B. 5-10
Deaf ...	Caterham, Portley House ...	40 B. Boarding	3-11½
	Redhill, Nutfield Priory ...	80 M. Boarding	11½-16
Partially hearing ...	Ewell, Riverview County Primary ...	15 M. Day	5-11
	Woking, Woodlands County Primary ...	15 M. Day	5-11
Maladjusted ...	Camberley, Wishmore Cross ...	40 B.	11-16
	Dorking, Starhurst ...	30 B.	11-16
	Guildford, Thornchace, Merrow (Hostel) ...	18 M.	G. 5-12 B. 5-11
	Guildford, Grove Class, Merrow (day class) ...	15 M.	7-12
	Sutton, North Downs (day class) ...	15 M.	7-12
	Wimbledon, Hollymount (day class) ...	30 M.	7-12
Retarded ...	Epsom, Clayhill Centre (Remedial Class) ...	32 M.	Primary

Educationally sub-normal pupils.

In May, 1963 the West Hill School for educationally sub-normal children at Leatherhead was opened, providing places for 120 children. This is the first purpose-built special school since St. Christopher's at Mitcham was provided in the late 1920's. The temporary premises at West Hill, Epsom, used by this school were then made available for Clayhill Centre for Remedial Education, where some 30 retarded children attend on a part-time basis to receive special help with their education. In January, 1964 the St. Hilda's Temporary School, Barnes, for primary aged educationally sub-normal children opened providing accommodation for 50 pupils. Later it is hoped to provide a purpose-built school for 120 children. The Committee also intend to open two additional day schools for educationally sub-normal children—a temporary school at Guildford for up to 60 pupils, which

will form the nucleus of the purpose built special school for 120 children included in the Major Building Programme for 1964/65, and at Camberley where a property has been acquired to provide for 80 educationally sub-normal children.

Deaf and Partially Hearing Pupils.

As from the autumn, 1963 the Committee assumed liability for the education provided at the unit for non-communicating children at the Belmont Hospital, Belmont. The services of one full-time and one part-time qualified teacher of the deaf are provided, some 12 children being given specialised help at any one time. The Partially Hearing Unit at Woodlands County Primary School opened in September, 1963.

Maladjusted pupils.

An additional 10 secondary aged maladjusted boys were admitted into the Wishmore Cross School at Camberley as from September, 1963 where accommodation is now available for 40 pupils.

Hospital schools.

The Committee provide education for handicapped pupils on the registers of the following hospital special schools :—

Carshalton, Queen Mary's Hospital.
Purford, The Rowley Bristow Orthopaedic Hospital School.
Epsom, Long Grove Hospital School.
Tadworth, Tadworth Court Hospital School.

In addition there were 76 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 51 children being educated in this way.

The Mental Health Act, 1959, gives power to the Local Health Authority to deem children "unsuitable for education in school" on account of sub-normal mentality. Most of these children are known to the authority at a relatively early age, and a decision on this matter is usually taken at some point before the child reaches the age of five. The authority has, however, the power to make an ascertainment at any stage of a child's life. The majority of cases are informally ascertained, that is to say, the parents do not question the arrangements proposed for the care of the child. Under these circumstances the Minister advises that no formal decision need be recorded under Section 57 of the Education Act. As a result the number of examinations arranged under the provisions of Section 57 has been considerably reduced. Seven children were reported to the Mental Health Committee in 1963 as unsuitable for education at school. The comparable figure for 1962 was 11.

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. 63 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 272 children admitted to convalescent homes during the year, a slight decrease from the previous year when the number was 323. The normal period of stay varies from two to four weeks.

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 1963 :—

Disease.	Suffering.	Excluded on suspicion.	Infection at home.	Total exclusions.
Small Pox	—	—	—	—
Diphtheria	—	—	—	—
Scarlet fever	218	4	22	244
Enteric fever	—	—	—	—
Measles	6,435	24	81	6,540
Whooping cough	303	14	24	341
German measles	545	4	11	560
Chicken-pox	3,049	38	18	3,105
Mumps	2,655	12	31	2,698
Jaundice	25	2	1	28
Other	481	4	26	511
Totals	13,711	102	214	14,027

CONTAGIOUS DISEASES.

Disease.	Suffering.	Excluded on suspicion.	Total exclusions.
Ringworm	4	—	4
Impetigo	14	—	14
Scabies	19	—	19
Other	56	1	57
Totals	93	1	94

Tuberculosis in schools.

During the year a total of 23 school children, teachers and other school staff were notified as suffering from tuberculosis, as follows:—

Category.	Maintained Schools.	Independent Schools.	Totals.
School children	12	2	14
Teachers	3	—	3
Clerical staff	1	—	1
Caretaker	—	1	1
Domestic staff	—	4	4
Totals	16	7	23

It was decided that special investigations should be carried out at 11 of the schools involved (7 in maintained schools and 4 in independent schools). Ten of these investigations had been completed by the end of 1963 with the following results.

In 9 of the 10 investigations, 1,370 children were Mantoux tested, and, excluding 336 children known to have had B.C.G. vaccination or to have been Mantoux positive earlier, 88 more, or 8.5 per cent, were found to be Mantoux positive. The positive reactors were given chest X-ray examinations and 620 other children in the 10 investigations were similarly examined where X-ray only was felt to be sufficient. The results of these X-ray examinations were satisfactory and showed that no spread of infection had occurred in any of the incidents. One boy who was not the index case was found to be suffering from active tuberculosis, but he had been under observation previously as a contact of his father, and it was considered that the finding was coincidental and that the boy had not contracted the disease through contact at his school.

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 1963 are described in the County Medical Officer's annual report.

PROMOTION OF HEALTH.

Health education.

Information on health matters in the form of material and advice on the teaching of health subjects, especially on dental health and smoking, has continued to be furnished to teachers and pupils. It was realised, however, that literature on health is insufficient unless supported and developed by direct teaching. To this end, following discussion with the central office staff and organizations concerned, three study days on health education in schools were convened to provide heads of secondary schools with the opportunity of considering policy and practice on this topic. Speakers were drawn from the Ministry of Education, the University of London, the Central Council for Health Education and from the secondary schools. Two of the conferences were held during the year, each catering for some sixty heads of schools. Full opportunity was given for discussion and it is already apparent that interest in this aspect of school life has been enhanced. Furthermore, these meetings, which were attended by the medical and nursing staff of the Council, have served to strengthen the link between the teaching and health staffs which is so vital for the promotion of health.

A third conference is planned and it is hoped that discussions with heads of primary schools will follow along similar lines.

The work of the teachers has been supported again by that of the health visitors, dental hygienists, medical and dental officers, many of whom have received further training in teaching methods. Courses in visual aids, and especially those for cine-projectionists, have been provided for a large number of the staff of the health department. Divisional medical officers have been acquiring further teaching aids to assist their staff in this field of activity. The number of teaching sessions in schools undertaken by health visitors continues to rise, their professional training enabling them to make a

valuable contribution in the following subjects: mothercraft, parentcraft, child care, dental health, personal and community health and human relationships.

The special campaign on smoking and health was continued during the year in the secondary schools and youth clubs. The campaign extended to a total of 52 working days, each comprising two sessions of about three hours. Visits were carried out in 102 schools and 39 youth clubs. The total attendances, in round numbers, were about 10,000 at secondary schools and about 1,000 at youth centres. Three hundred and fifty student teachers and most of the staff attended a session at the teachers' training college. In addition, the following people were present from time to time: head and assistant teachers, county inspectorate, divisional medical and education officers and their staffs, district youth officers, youth leaders, school managers/governors, members of County District Councils and parents. Some 6,000 posters of eleven different designs and over 12,000 leaflets were distributed. Indications show that many teachers have taken up the points given in the talks and embodied them in their teaching. Practical expression to the teaching resulted in the production of posters, other art work, essays and discussion.

An evaluation was conducted in one of the divisions based on two questionnaires produced by the Central Council for Health Education: one held before the visit of the mobile unit and one held three months later.

Five schools which received a visit were matched by five control schools which received no special talks on smoking. A similar number of schools in the north of England is being used for the same purpose. It is hoped that the results of this questionnaire will not only indicate how successful the campaign has been, but also will provide some pointers on method. A second visit of the mobile unit is planned for the ensuing year.

A low intensity dental health education campaign was planned for schools in the North-Eastern Division during the year. The teaching was carried out by the dental hygienist, assisted by students of the School of Dental Hygiene at St. George's Hospital and the staff of the Oral Hygiene Service. Unfortunately, after completing about one-third of the task, the campaign had to be discontinued owing to the absence of the dental hygienist in charge. Work of this character, however, is being carried out by school dental officers, a dental hygienist and by health visitors on an individual basis with the active co-operation of heads of schools throughout the County.

Report on physical education.

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

At the end of September 1963 Miss I. F. Pope retired after serving the County as Organiser of Physical Education for 26 years. It is difficult to pay adequate tribute to her work or to the remarkable influence she had over the whole field of physical education. She will be remembered with affection by all Surrey teachers and colleagues in the education service, and with respect for her part in the immense development of physical education in schools, evening institutes and youth clubs over the last 20 years.

She has been succeeded by Miss B. D. Sanders whose previous experience has been in teaching, university lecturing (both in England and America), and in the organisation of physical education in Wiltshire.

Primary schools.

Interesting experimental work in movement training with music and percussion instruments has been an important feature in the pattern of primary school work during this year. The experiment was made possible, and its success was due to the co-operation between the County's physical education inspectors and organisers of music. A film record of some of this work has been made and it is hoped that this will encourage further developments in "music and movement" as part of the physical education programme in primary schools.

Improvements in the provision of apparatus and storage space have again been made wherever possible, especially in smaller rural schools where the lack of facilities is usually greatest.

Fewer courses were arranged because of Miss Pope's retirement but those that were held were well attended.

Secondary schools.

It is at the secondary stage that most progress has been made during this year.

(a) Staffing.

It has been possible to fill most of the vacancies for specialist men teachers of physical education and the position in regard to women teachers has improved.

(b) Equipment.

Many more schools have benefited from the grant to improve facilities and equipment especially for tennis, athletics, basketball, cricket, and gymnastics.

(c) Trampolining.

Courses on trampoline work have been arranged and over 60 teachers have had sufficient initial training to start the work in schools. In the few schools where trampolines have been supplied a very good standard of work has been reached.

- (d) Two parties of Surrey boys and girls have had organised ski-ing instruction at Davos during the year.
- (e) *S.P.E.A.*
The Surrey Physical Education Association whose inauguration was mentioned in last year's report has now a "live" membership of 140 teachers, lecturers, organisers and inspectors. Two or three meetings are held each term to give members the opportunity of seeing, discussing, or actually taking part in new types of activity. It is proving most successful and worthwhile.
- (f) During the year the "Surrey Council for School Sports" has been formed to give help and advice to all school sports associations. A Surrey Schools Lawn Tennis Association has also come into being and has been helped by a grant from the Education Committee.
- (g) *Outdoor activities.*
The enthusiasm noted in previous years for rock climbing, canoeing, sailing, camping and other expeditions, and the Duke of Edinburgh's Award Scheme has been more than maintained and it is hoped that a suitable centre may be found for training and practice in these pursuits.
- (h) Close co-operation has been maintained with all the major national sports associations and with the Central Council for Physical Recreation whose technical officers have helped in many training courses.

Swimming.

Keeness for swimming is still running very high especially in primary schools where the opportunities are greatest. 31 schools have "learners' pools," some of which are shared, and 6 secondary schools have larger recreational pools suitable for all types of swimming, diving, and life saving.

There has been more demand for instructional courses including the A.S.A.'s methods on "swimming for survival" and the "mouth-to-mouth" technique of resuscitation. With the help of the national technical officers of the A.S.A., the Royal Lifesaving Society, St. John Ambulance and the Red Cross Society these demands are being met.

Open air education.

Summer camp.

Owing to staffing difficulties the Henley Fort camp was in use for only twelve weeks. During this period no serious illness occurred. The following statistics are given for 1963 together with those for the preceding year :—

	1962 (41st season)	1963 (42nd season)
Number of children	586	405
Number of teachers	41	36
Number of schools	10	6
Average cost of food per head per week ...	£1/7/2d.	£1/10/9d.
Number of weeks	20	12

Sheephatch school.

Sheephatch provides the opportunity for boys and girls to experience the community life of a boarding school and at the same time to live for a while in the English countryside. General education is provided for pupils from the age of about twelve and a half, and most children can continue the course which they are following in their day schools, without interruption. Special provision is made for the teaching of rural science, and maximum advantage is gained by those pupils who observe the full cycle of the seasons by going to Sheephatch for a full year. The school is situated and equipped to give extraordinary opportunities for outdoor pursuits both in its immediate surroundings and by journeys to other centres for short courses to develop initiative and self-reliance.

Boys and girls from 12½ 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 because 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.

Provision of meals and milk.

The following table gives statistics as to the number of day pupils receiving mid-day meals at maintained schools on a day in October, 1963.

No. in Attendance.	Number taking meals.	Percentage taking meals at		
		Full-cost.	Half-cost.	Free.
171,679	122,948	97	0.3	2.7

The total number of pupils, both day and boarding, who were receiving milk free of cost was 137,735 in maintained schools and 36,993 in non-maintained schools.

FURTHER EDUCATION AND TRAINING OF DISABLED PERSONS.

At 31st December, 1963, the Education Committee was responsible for the maintenance and training at residential institutions of 19 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.

The Bye-laws regulating the employment of children, provide for the medical examination of children in part-time employment annually.

Of the 2,905 children who were medically examined during the year as to their fitness to take part-time employment only 8 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 3,264 examinations and re-examinations were carried out for this purpose.

There were 32 licences applied for during the year for pupils to take part in entertainments. All these children were examined by school medical officers and found to be fit.

REPORT OF PRINCIPAL SCHOOL DENTAL OFFICER FOR THE YEAR 1963.

Staff.

The dental staff at the 31st December consisted of 30 full-time, 3 part-time salaried officers and 33 sessionally employed officers equivalent to 12.5 additional full-time officers. At the end of 1962 the numbers of officers in post were the same, but at that time the 33 sessionally employed officers were equivalent to 12.2 additional full-time officers. There were, however, fluctuations in the strength of the staff during the course of the year which were mainly confined to sessionally employed officers. Dental Officers devote approximately 90 per cent of their time to the inspection and treatment of school children, and approximately 10 per cent to the treatment of Expectant and Nursing Mothers and Children under five years of age.

Accommodation and Equipment.

During the year under review, three new dental clinics were opened. Acre Road Clinic, Kingston-upon-Thames, was opened in March replacing the services formerly provided at Queen's Road, Kingston Hill. The new premises provided accommodation on the first floor for a dental clinic and a dental laboratory. The dental services were transferred from Pelham House, Harestone Valley Road, Caterham, to the new clinic at Stafford Road in August, and a new dental clinic replaced the original accommodation at the Municipal Institute, Rochester Road, Carshalton. The above clinics were equipped with dental units, airtors and X-ray apparatus. Additionally, adaptations to improve the existing dental clinic at Priory Crescent, North Cheam, were completed.

Orthodontic Service.

Orthodontic treatment was carried out by three full-time officers and four part-time officers specially engaged for this purpose. Most dental officers also undertake a limited amount of orthodontic treatment either on their own initiative or in consultation with an orthodontist. The majority of the cases were treated by removable appliances (2,091) and, in addition, 31 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 the patients and in the vast majority of cases a successful result, both functionally and aesthetically, 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-rays are available in 21 clinics throughout the County.

County Dental Laboratory.

The Staff of the laboratory consisted of a Chief Technician, assisted by five technicians and two apprentices. Most of the prosthetic work from the Council's clinics is undertaken at the laboratory but a limited amount of work was sent to outside laboratories. The new laboratory which was opened in March provides accommodation for a main workshop, with excellent natural lighting, a polishing room with dust extraction equipment, a plaster room, and adequate storage facilities.

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.
1,839 (1,839)	153 (323)	172 (184)	108 (114)	2,254 (2,254)	152 (372)	4,678 (5,086)

Dental Hygienists.

The duties of hygienists are sealing and polishing of the teeth and dental health education to patients as individuals or in groups. 2,010 sealings and polishings were carried out and 93 hours were spent in chairside instruction in oral hygiene.

Dental Inspection and Treatment.

An analysis of the work carried out during the year shows that 144,818 children were inspected at routine school inspections and 8,917 as specials at clinics making a total of 153,735. Most of the schools were visited during the course of the year and in several instances there were two routine inspections during this period. Fillings in permanent teeth numbered 58,393, and in temporary teeth 21,867, a total of 80,260. The number of permanent teeth extracted was 5,216 and temporary teeth, 14,250. Statistical information is given in Table IV.

Dental Health Education.

A further series of illustrated talks on dental health was undertaken in schools in Guildford in March and April, 1963, following the Dental Health Education Campaign which took place from October, 1961, to March, 1962. In addition, talks were given in many other schools in particular in Merton and Morden, Wimbledon and Caterham.

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.

Age Groups Inspected (by years of birth).	No. of Pupils Inspected.	Physical Condition of Pupils Inspected.			
		SATISFACTORY.		UNSATISFACTORY.	
		No. (3)	% of Col. 2 (4)	No. (5)	% of Col. 2. (6)
(1)	(2)				
1959 and later ...	1,474	1,473	99.9	1	.1
1958 ...	13,431	13,366	99.5	65	.5
1957 ...	4,420	4,397	99.5	23	.5
1956 ...	850	835	99.4	5	.6
1955 ...	13,167	13,121	99.7	46	.3
1954 ...	1,709	1,703	99.7	6	.3
1953 ...	693	688	99.3	5	.7
1952 ...	7,838	7,815	99.7	23	.3
1951 ...	7,866	7,839	99.7	27	.3
1950 ...	2,256	2,247	99.6	9	.4
1949 ...	2,415	2,412	99.9	3	.1
1948 and earlier ...	16,081	16,048	99.8	33	.2
TOTAL ...	72,200	71,954	99.7	246	.3

B.—PUPILS FOUND TO REQUIRE TREATMENT AT PERIODIC MEDICAL INSPECTIONS
(excluding dental diseases and infestation with vermin).

Age Groups Inspected (by year of birth).	For defective vision (excluding squint).	For any of the other conditions recorded in Table II.	Total individual pupils.
1959 and later ...	6	134	137
1958 ...	307	1,228	1,419
1957 ...	137	488	588
1956 ...	53	108	146
1955 ...	623	933	1,450
1954 ...	93	158	238
1953 ...	79	82	150
1952 ...	672	628	1,213
1951 ...	661	622	1,195
1950 ...	251	207	425
1949 ...	222	186	385
1948 and earlier ...	1,410	927	2,188
TOTAL ...	4,514	5,701	9,534

C.—OTHER INSPECTIONS.

Number of Special Inspections ...	11,467
Number of re-inspections ...	10,840
Total ...	<u>22,307</u>

D.—INFESTATION WITH VERMIN.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ...	83,850
(b) Total number of individual pupils found to be infested ...	690
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ...	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54(3), Education Act, 1944) ...	—

TABLE II.
DEFECTS FOUND BY MEDICAL INSPECTION DURING THE YEAR.
A.—PERIODIC INSPECTIONS.

Defect or Disease.	PERIODIC INSPECTIONS.							
	Entrants.		Leavers.		Others.		Total.	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin	115	394	290	572	380	819	785	1,785
Eyes—								
(a) Vision	504	959	1,451	1,951	2,457	2,895	4,412	5,805
(b) Squint	138	251	36	109	215	322	389	682
(c) Other	28	85	44	162	88	243	160	490
Ears—								
(a) Hearing	107	352	38	145	196	681	341	1,178
(b) Otitis Media	46	418	23	104	72	397	141	919
(c) Other	37	105	43	99	68	210	148	414
Nose and Throat	311	1,915	65	319	335	1,711	711	3,945
Speech	172	383	16	60	145	309	333	752
Lymphatic Glands	100	679	14	64	115	473	229	1,216
Heart	41	293	26	183	72	374	139	850
Lungs	93	520	61	231	166	161	320	912
Developmental—								
(a) Hernia	33	69	5	17	32	64	70	150
(b) Other	56	388	20	149	147	735	223	1,272
Orthopaedic—								
(a) Posture	46	175	107	362	284	536	437	1,073
(b) Feet	286	640	91	387	471	997	848	2,024
(c) Other	98	535	124	534	232	856	454	1,925
Nervous System—								
(a) Epilepsy	12	27	10	34	31	60	53	121
(b) Other	11	97	7	56	38	138	56	291
Psychological—								
(a) Development	13	105	18	79	212	261	243	445
(b) Stability	70	328	32	114	157	595	259	1,037
Abdomen	29	113	22	47	54	249	105	409
Other	198	426	125	308	509	863	832	1,597
Total	2,544	9,257	2,668	6,086	6,476	13,949	11,688	29,292

T = Treatment. O = Observation.

B.—SPECIAL INSPECTIONS.

Defect or Disease.	Special Inspections	
	requiring treatment.	requiring observation.
Skin	1,014	107
Eyes—		
(a) Vision	1,302	1,002
(b) Squint	155	23
(c) Other	127	31
Ears—		
(a) Hearing	408	561
(b) Otitis Media	40	26
(c) Other	104	26
Nose and Throat	604	274
Speech	295	129
Lymphatic Glands	14	26
Heart	29	76
Lungs	102	130
Developmental—		
(a) Hernia	9	13
(b) Other	49	102
Orthopaedic—		
(a) Posture	75	80
(b) Feet	147	121
(c) Other	205	20
Nervous System—		
(a) Epilepsy	10	13
(b) Other	24	25
Psychological—		
(a) Development	124	76
(b) Stability	177	152
Abdomen	50	39
Other	776	346
Total	5,840	3,398

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	348
Errors of refraction (including squint)	12,710
Total	13,058
Number of pupils for whom spectacles were prescribed	5,801

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

	Number of cases known to have been dealt with.
Received operative treatment :—	
(a) for diseases of the ear... ..	15
(b) for adenoids and chronic tonsillitis	934
(c) for other nose and throat conditions	39
Received other forms of treatment	854
Total	1,842
Total number of pupils in schools who are known to have been provided with hearing aids :—	
(a) in 1963	32
(b) in previous years	234

C.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated.
(a) Pupils treated at clinics or out-patients departments	2,329
(b) Pupils treated at school for postural defects	475
Total	2,804

D.—DISEASES OF THE SKIN.

	Number of cases known to have been treated.
Ringworm—	
(a) Scalp	2
(b) Body	—
Scabies	5
Impetigo	43
Other skin diseases	1,576
Total	1,626

E.—CHILD GUIDANCE TREATMENT.

	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics	822

F.—SPEECH THERAPY.

	Number of cases known to have been treated.
Pupils treated by speech therapists	2,258

G.—OTHER TREATMENT GIVEN.

	Number of cases known to have been dealt with.
(a) Pupils with minor ailments	2,893
(b) Pupils who received convalescent treatment under School Health Service arrangements ...	272
(c) Pupils who received B.C.G. vaccination ...	14,672
(d) Other than (a), (b) and (c) above :—	
Lymphatic Glands	47
Abdomen	134
Heart and Circulation	67
Lungs	267
Development	141
Nervous System	80
Psychological	25
Total (a) to (d)	18,598

TABLE IV.

DENTAL INSPECTION AND TREATMENT.

(1) Number of pupils inspected :—	
(a) At periodic inspections	144,818
(b) As specials	8,917
Total (1)	153,735
(2) Number found to require treatment	70,275
(3) Number offered treatment	65,718
(4) Number actually treated	33,723
(5) Number of attendances made by pupils for treatment, excluding those recorded at 11 (h)	98,405
(6) Half-days devoted to :—	
(a) Periodic (school) inspection	1,626
(b) Treatment	15,814
Total (6)	17,440
(7) Fillings :—	
(a) Permanent teeth	58,393
(b) Temporary teeth	21,867
Total (7)	80,260
(8) Number of teeth filled :—	
(a) Permanent teeth	48,501
(b) Temporary teeth	18,643
Total (8)	67,144
(9) Extractions :—	
(a) Permanent teeth	5,216
(b) Temporary teeth	14,240
Total (9)	19,456
(10) Administration of general anaesthetics for extraction ...	7,861
(11) Orthodontics :—	
(a) Cases commenced during the year	1,713
(b) Cases carried forward from previous year	3,312
(c) Cases completed during the year	677
(d) Cases discontinued during the year	180
(e) Pupils treated with appliances	1,747
(f) Removable appliances fitted	2,091
(g) Fixed appliances fitted	31
(h) Total attendances... ..	18,500
(12) Number of pupils supplied with artificial teeth	109
(13) Other operations—	
(i) Crowns	54
(ii) Inlays	51
(iii) Other treatment	31,561
	31,666

