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SURREY COUNTY COUNCIL

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# ANNUAL REPORTS

OF THE

COUNTY MEDICAL OFFICER OF HEALTH

AND

PRINCIPAL SCHOOL MEDICAL OFFICER

FOR THE YEAR

1965



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Surrey County Council

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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 1965; this has been prepared in accordance with Circular 1/66 of the Ministry of Health.

On 1st April, 1965, the London Government Act 1963 came into operation, and its effect was to reduce the Administrative County both in size and in population. The total area of the former County was 449,160 acres: that of the new County, 415,879 acres. The total population of the former County at mid-year 1964 was 1,521,510: that of the new County at mid-year 1965 was 967,770. Twelve county districts in the former County were transferred to "Greater London" and became parts of five London Boroughs, while two county districts formerly in Middlesex were transferred to Surrey. All these districts are given by name on page 6 of the report.

One of the effects of these changes, in so far as my Report is concerned has been that many of the statistical tables have had to be curtailed by the omissions of comparisons with previous years: or alternatively, have had to be omitted altogether. Further, the transition took place on 1st April, 1965, while my Report is required to cover the calendar year, and it seemed that members would find it most helpful to have figures for the new County for the whole year and to omit figures for the severed parts of the County for the first three months; this has, where appropriate, been done. Similarly, figures for Staines and Sunbury—the two county districts added to the County—have been given for the whole year.

The total number of live births in the County was 15,960, representing a rate of 16.49 per thousand population. The comparable rate for England and Wales was 18.0 per thousand. The number of deaths was 10,124, i.e. a crude death rate of 10.46 (as compared with a rate of 11.5 for England and Wales). Thus the natural increase of population was 5,836, while on the other hand, the Registrar-General's estimate of the increase in population from mid-year 1964 to mid-year 1965 which, of course, considers also movements of the population, was 11,860.

The number of still births was 187, representing a still birth rate of 11.58 per thousand live and still births and the number of deaths of infants under the age of 1 year was 244, that is, a rate of 15.29 per thousand. This latter rate is substantially lower than the corresponding rate for England and Wales, namely 19.0 per thousand. In my Report for 1964, I drew attention to the increase over recent years in the number and in the rate of illegitimate births. The number of these births for the new County was 917 which represents a rate of 5.75 per cent of all live births, and is a slight decrease over the figure for the previous year. Only two women died in the year from causes associated with pregnancy or childbirth.

Unfortunately, figures over the past decade give no suggestion of any diminution in the proportion of premature births. Prematurity remains a major factor in the loss of infant lives. 15,204 non-premature live and still births in the year yielded 132 deaths (up to the end of the first month of life), this being a ratio of 0.87 per cent: while the 943 premature live and still births yielded 228 infant deaths, a ratio of 24.18 per cent. Analysis of the figures on page 26 show a reasonable degree of success in forecasting an unfortunate train of events, and thus in ensuring that the mother's confinement takes place in hospital where any necessary means of dealing with possible complications are most readily available, i.e. while the overall proportion of confinements taking place in homes or in nursing homes is about a quarter of the total, only an eighth of the total premature births took place in the homes or nursing homes.

It will be noted (table on page 11) that the rates of deaths from malignant diseases of the stomach and of the lung and bronchus were substantially lower in 1965 than in 1964. This may be a reflection of the fact that the "new" County is less highly urbanized than the old.

Four new welfare centre/school clinics were completed and opened during the year, namely, Church Street, Epsom: Berkshire Road, Camberley: Victoria Road, Horley: and Bury Fields, Guildford. Two other clinics—Tattenham Crescent, Banstead, and Molesey Road, Hersham—were nearing completion, and were in fact opened early in 1966.

A number of enquiries was received from general practitioners as to the possibilities of health centre practice, and it is now the normal procedure that, at the inception of a scheme for building a welfare centre/school clinic in any area of the County, a note to that effect is circulated to all general medical practitioners asking if they would like to have consulting rooms provided for them at the centre. By the end of the year 16 schemes for health centres were included in the 10-year Capital Building Programme. In addition, a considerable number of requests was received for health visitors to be attached to general practitioners, and the number of such attachments had by mid-year 1966 increased to 22. A small number of attachments of district nurses was also achieved. Both these



developments were welcomed by the Health Committee as offering the opportunity of improving the services to the public.

At its meeting in October 1965, the County Council approved in principle the introduction of fluoride into the water supplies and authorised an approach to the statutory water undertakings supplying parts of the County for the purpose of making arrangements for fluoride to be added to the water supply to the level appropriate for the prevention of dental decay (i.e. one part per million expressed as F plus or minus 10 per cent), subject to the prior approval of the Ministry of Housing and Local Government on the technical aspects, and on the arrangements for supervision.

I beg to draw the attention of members to the paragraph on cervical cytology on page 21. After considerable delay—largely occasioned by the difficulty in recruiting trained staff—a start on a very limited scale was made in developing this important preventive measure in 1965. It now seems hopeful that a considerable expansion of the facilities available will be possible in 1966.

During the year the St. John Ambulance Brigade decided to terminate their agreement with the County Council to act as agents for the provision of certain ambulance services; and arrangements to take over these services were made covering the later months of 1965 and the early part of 1966. I should like to take the opportunity of expressing my appreciation of the very valuable help with the ambulance service given by the St. John over the years since the inception of the National Health Service.

#### *School Health Service.*

The general condition of our school children must be considered to be highly satisfactory and it is notable that of the forty-three thousand children examined at routine medical inspections only 0.14 per cent were classed as unsatisfactory in physical condition.

In spite of this, however, it is not out of place in this report to comment on the situation in later life, when the rising incidence of disease, such as mental breakdown, coronary thrombosis and cancer of various types gives cause for serious concern. It is for this reason that intensive efforts to introduce a greater emphasis on design for healthy living into the normal school curriculum are of such considerable importance. The intensified efforts in this field, referred to under the heading of Promotion of Health, are therefore particularly worthy of note, and the interest manifested in the subject by the heads of schools who attended the study days was extremely gratifying.

I should like to draw your attention to two matters of importance which have been initiated during the year. The first is the scheme for sponsoring suitable candidates on approved courses in educational psychology. The shortage of workers in this field has become increasingly noticeable with the passage of time and with the greater appreciation of the importance of this service which has occurred generally throughout the country. The agreement to sponsor candidates has already shown encouraging results.

The second point of particular interest this year has been the opening of The Lindens unit for young children suffering from severe behaviour disorders. The placement of these children has been a severe problem to both medical and educational staff for a long time, whether the children be classified as autistic or merely under the wider heading of maladjusted. Although it is only possible for The Lindens to serve a limited area of the County, and it is still early days to comment, I am happy to report that a considerable number of children who could not readily be placed elsewhere have already been admitted to the new unit.

Once again the year has passed without a single case of poliomyelitis among the children of Surrey. Three tuberculosis investigations were carried out in schools on the recommendations of Chest Physicians. Some idea of the work involved in these investigations can be obtained by reference to the section on this subject where one investigation is described in detail. While it is pleasant to recount that no active case of tuberculosis was uncovered by the surveys, the occurrence of an initial case of tuberculosis in a school, whether in child or adult, does still give rise to concern, and vigilance in this field is still indicated.

In conclusion, my most grateful thanks are due to the staff of the department both in the office and the field for their work, willingly and generously given, throughout the year. In my last Report, I referred to the heavy demands made on them, particularly on the staff of the central office, by the re-organisation of the County consequent on the London Government Act. This heavy pressure continued up to and beyond the appointed day, and it is a great tribute to their efforts that the transition was carried out so smoothly.

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.

As a result of the London Government Act, 1963, which came into operation on 1st April, 1965, the area of the Administrative County was reduced. Twelve County Districts, namely Barnes, Beddington & Wallington, Carshalton, Coulsdon & Purley, Kingston upon Thames, Malden & Coombe, Merton, Mitcham, Richmond, Surbiton, Sutton & Cheam and Wimbledon, formed parts of new London Boroughs, whilst two districts, Staines and Sunbury-on-Thames, were transferred from Middlesex to Surrey under the Act. The total area of the Administrative County before the London Government Act, 1963, was 449,160 acres. The changes outlined above resulted in the loss of 33,281 acres, the total area now being 415,879 acres.

### Population.

The population of the "Old" Administrative County at mid-year 1964 was 1,521,510, and of the "New" Administrative County at mid-year 1965, 967,770, the large decrease of 553,740 being due to the change in area following the London Government Act, 1963.

It is pointed out that purely for the purpose of comparison the figures given below express the populations as they would have appeared if the Administrative County during the years mentioned consisted of the same area and districts as it does now as a result of the London Government Act, 1963.

The population of the Administrative County at the 1961 census was 904,287, and the Registrar-General's estimate of the population at mid-year 1965 was 967,770, an increase of 11,860 over the comparable figure for mid-year 1964. The population under 1 year is given by the Registrar-General as 15,600, the population 1-4 years as 65,100, and the population 5-14 years, 132,700.

The Registrar-General's mid-year estimate of the population for the Urban and Rural areas during each of the five years 1961-1965 is shown in the following table:—

	1961	1962	1963	1964	1965
Urban Districts ...	727,630	739,900	750,090	764,750	775,470
Rural Districts ...	178,230	181,360	185,720	191,160	192,300
Administrative County	905,860	921,260	935,810	955,910	967,770
Increase or decrease over previous year ...	+27,770	+15,400	+14,550	+20,100	+11,860

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 1964 and 1965:—

DISTRICTS		Area in Acres.	Census Population.		Registrar-General's Estimates of Mid-year populations.	
			1951	1961	1964	1965
M.B. and Urban.						
1.	Banstead ... ..	12,821	33,529	41,573	41,870	41,990
2.	Caterham and Warlingham ... ..	8,233	31,293	34,808	36,350	36,660
3.	Chertsey ... ..	9,983	30,852	40,376	42,870	43,660
4.	Dorking ... ..	9,511	20,252	22,594	23,020	23,200
5.	Egham ... ..	9,350	24,690	30,553	31,470	31,460
6.	Epsom and Ewell ... ..	8,427	68,055	71,177	71,700	71,980
7.	Esher ... ..	14,850	51,432	69,586	62,140	62,470
8.	Farnham ... ..	9,039	23,928	26,927	28,970	29,510
9.	Frimley and Camberley ... ..	7,768	20,386	30,342	36,140	38,610
10.	Godalming ... ..	2,393	14,244	15,771	17,590	17,720
11.	Guildford... ..	7,323	48,048	53,977	54,090	54,830
12.	Haslemere ... ..	5,751	12,003	12,528	13,210	13,200
13.	Leatherhead ... ..	11,187	27,206	35,554	37,270	37,520
14.	Reigate ... ..	10,255	42,248	53,710	55,150	55,490
15.	Staines ... ..	8,271	39,995	49,259	53,240	53,790
16.	Sunbury ... ..	5,609	23,394	33,493	37,040	38,080
17.	Walton and Weybridge... ..	9,049	38,112	45,497	48,400	49,280
18.	Woking ... ..	15,708	47,596	67,485	74,230	76,020
Total ...		165,528	597,263	726,210	764,750	775,470
Rural.						
1.	Bagshot ... ..	16,083	14,109	16,744	17,490	17,920
2.	Dorking and Horley ... ..	53,943	25,832	31,698	33,600	34,000
3.	Godstone ... ..	52,507	32,823	40,068	43,510	43,350
4.	Guildford... ..	59,643	44,936	54,777	60,530	60,780
5.	Hambledon ... ..	68,175	31,851	34,790	36,030	36,250
Total ...		250,351	149,551	178,077	191,160	192,300
Administrative County ... ..		415,879	746,814	904,287	955,910	967,770

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, 1965, was £49,224,472, and the estimated product of a 1d. rate for general County purposes for the year 1965-66 was £202,496.

## VITAL STATISTICS.

The principal vital statistics for the year 1965 are summarised below. Additional information is given in the paragraphs which follow :—

Live births	...	...	...	...	...	...	15,960
Live birth rate per 1,000 population	...	...	...	...	...	...	16.49
Still births	...	...	...	...	...	...	187
Still birth rate per 1,000 live and still births	...	...	...	...	...	...	11.58
Total live and still births	...	...	...	...	...	...	16,147
Infant deaths	...	...	...	...	...	...	244
Infant mortality rate per 1,000 live births	...	...	...	...	...	...	15.29
" " " " " legitimate births	...	...	...	...	...	...	14.82
" " " " " illegitimate births	...	...	...	...	...	...	22.90
Neo-natal mortality rate (first four weeks) per 1,000 live births	...	...	...	...	...	...	10.84
Early neo-natal mortality rate (first week) per 1,000 live births	...	...	...	...	...	...	9.27
Peri-natal mortality rate (still births and deaths under one week) per 1,000 live and still births	...	...	...	...	...	...	20.75
Illegitimate live births per cent of total live births	...	...	...	...	...	...	5.75
Maternal deaths (including abortion)	...	...	...	...	...	...	2
Maternal mortality rate per 1,000 total births	...	...	...	...	...	...	0.12

The following statement compares the County birth and death rates for the year 1965 with the previous year and with the mean of the five years 1960-64.

	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.		
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
1963 ... ..	15.63	12.01	0.05	2.12	0.38	17.08
1964 ... ..	16.08	10.99	0.03	2.23	0.16	16.64
Mean of 5 years, 1960-1964...	15.44	11.43	0.04	2.17	0.26	17.04
1965 ... ..	16.49	10.46	0.04	2.03	0.12	15.29
Increase or decrease in 1965 on:						
5 years average ... ..	+1.05	—0.97	—	—0.14	—0.14	—1.75
Previous year ... ..	+0.41	—0.53	+0.01	—0.23	—0.04	—1.35

## Births and Birth Rate.

The live births registered in or belonging to the County during the year numbered 15,960, of which 8,203 were males and 7,757 females. The birth rate for the year was 16.49 as compared with 16.08 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 1.00, for the aggregate of Urban Districts 1.00 and for the Rural Districts 1.02. The effect of these factors on the 1965 crude live birth rates is shown below :—

	Administrative County.	Urban Districts.	Rural Districts.
	<i>per 1,000 of estimated home population.</i>		
Crude rates	16.49	16.31	17.24
Adjusted rates	16.49	16.31	17.58

The birth rate for England and Wales for 1965 was 18.0 and for 1964, 18.4.

In addition to the 15,960 live births in Surrey, there were 187 still births and the rate of still births per 1,000 live and still births was 11.58 as compared with an average rate of 13.38 for the quinquennial period of 1960-64.



Of the 15,960 live births, 917 or 5.75 per cent. were illegitimate, as compared with 5.87 per cent. in 1964.

The live birth rate, still birth rate and percentage of illegitimate births in recent years were as follows:—

Year.	Live birth rate.	Rate of still births per 1,000 live and still births.	Illegitimate births Percentage of total live births.
1931...	13.92	32.5	4.3
1941...	13.47	28.5	6.55
1942...	16.57	27.7	6.35
1943...	17.34	27.2	6.95
1944...	17.86	24.5	7.76
1945...	16.03	21.0	8.94
1946...	18.19	22.9	5.98
1947...	18.48	21.3	4.58
1948...	15.79	19.3	4.76
1949...	14.71	19.9	4.56
1950...	13.53	19.1	4.23
1951...	13.16	21.0	4.08
1952...	12.91	19.1	3.87
1953...	13.22	18.2	4.12
1954...	13.13	19.0	4.28
1955...	13.14	17.9	4.09
1956...	13.37	16.8	4.09
1957...	13.83	18.65	3.91
1958...	14.24	17.53	4.11
1959...	14.33	15.58	3.99
1960...	14.83	15.27	4.38
1961...	15.18	13.55	4.71
1962...	15.46	13.90	4.95
1963...	15.63	11.49	5.19
1964...	16.08	12.71	5.87
1965...	16.49	11.58	5.75

#### Deaths and Death Rate.

The number of deaths registered in the Administrative County during 1965 was 10,124. The crude death rate for 1965 was 10.46, compared with 10.99 for 1964. The death rate for England and Wales in 1965 was 11.5, compared with 11.3 for 1964.

#### Infant Mortality.

The number of infants under one year who died during 1965 was 244. This represents an infant mortality rate of 15.29 per 1,000 live births as compared with a corresponding rate of 16.64 for the year 1964. The comparable figures for England and Wales were 19.0 in 1965 and 20.0 in 1964.

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
1964 ...	20.0	13.8	6.2	16.64	12.71	3.93
1965 ...	19.0	13.0	6.0	15.29	10.84	4.45

### Maternal Mortality.

In 1965 2 women died from causes associated with pregnancy and child bearing including abortion. This gives a maternal mortality rate of 0.12 per 1,000 live and still births. The corresponding figures for England and Wales in 1965 were 219 and 0.25 : and for Surrey in 1964 were 4 and 0.16.

### Causes of Death.

The grouped causes of death arranged in order of frequency in 1965 in the County were as follows :—

	Deaths	Percentage of Total Deaths
Diseases of the heart ... ..	3,338	32.97
Malignant disease ... ..	1,960	19.36
Vascular lesions of the central nervous system ... ..	1,358	13.41
Bronchitis, pneumonia and other diseases of respiratory system... ..	1,170	11.56
Other circulatory diseases ... ..	512	5.06
Violent causes ... ..	398	3.93
Digestive diseases ... ..	106	1.05
Congenital malformations ... ..	87	0.86
Diabetes ... ..	81	0.80
Leukaemia, Aleukaemia ... ..	64	0.63
Nephritis and Nephrosis ... ..	42	0.41
Tuberculosis (all forms) ... ..	40	0.40
Hyperplasia of prostate ... ..	28	0.28
All other causes ... ..	940	9.28
	10,124	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 1965 :—

DISTRICTS	Live births.			Live birth rate.	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...	277	223	500	11.91	13.46	9	17.68	546	13.00	9.62	-46	1	1	3
Caterham and Warlingham	274	288	562	15.33	15.02	8	14.04	345	9.41	9.88	+217	5	2	4
Chertsey ...	473	409	882	20.20	17.17	9	10.10	371	8.50	9.86	+511	7	2	6
Dorking ...	211	192	403	17.37	16.85	3	7.39	278	11.98	10.66	+125	3	-	3
Egham ...	205	217	422	13.41	12.20	6	14.02	306	9.73	9.44	+116	10	-	-
Epsom and Ewell	467	466	933	12.96	14.64	10	10.60	1,083	15.05	9.48	-150	1	1	3
Fisher ...	433	432	865	13.85	15.10	12	13.68	629	10.07	9.16	+236	11	1	3
Farnham...	253	220	473	16.03	17.31	6	12.53	401	13.59	9.78	+72	2	-	3
Frimley and Camberley	488	492	980	25.38	22.08	9	9.10	241	6.24	8.99	+739	12	3	8
Godalming ...	171	148	319	18.00	17.82	1	3.13	176	9.93	9.53	+143	3	1	-
Guildford ...	453	430	883	16.10	15.30	9	10.09	565	10.30	9.68	+318	8	3	2
Haslemere ...	80	67	147	11.14	12.92	9	57.69	170	12.88	8.76	-23	1	-	2
Leatherhead ...	247	267	514	13.70	14.80	3	5.80	386	10.29	10.91	+128	3	1	-
Reigate ...	418	392	810	14.60	15.18	2	2.46	617	11.12	9.01	+193	11	1	1
Staines ...	514	472	986	18.33	16.31	13	13.01	473	8.79	11.25	+513	6	2	3
Sunbury-on-Thames	431	406	837	21.98	18.46	10	11.81	336	8.82	9.97	+501	8	1	7
Walton and Weybridge	403	381	784	15.91	16.86	8	10.10	513	10.41	8.95	+271	10	1	3
Woking ...	697	648	1,345	17.69	17.51	19	13.93	739	9.72	8.26	+625	8	1	9
Total ...	6,495	6,150	12,645	16.31	16.31	146	11.41	8,175	10.54	9.49	+4,470	119	21	60
Rural														
Bagshot ...	175	180	355	19.81	19.22	2	5.60	174	9.71	10.00	+181	6	2	2
Dorking and Horley	312	266	578	17.00	17.00	7	11.97	318	9.35	10.29	+260	6	-	5
Godstone...	360	340	700	16.15	16.47	14	19.61	512	11.81	9.80	+188	4	1	1
Guildford ...	586	538	1,124	18.49	18.86	13	11.43	544	8.95	9.67	+580	9	1	2
Hambleton ...	275	283	558	15.39	16.62	5	8.88	401	11.06	9.18	+157	4	-	1
Total ...	1,708	1,607	3,315	17.24	17.58	41	12.22	1,949	10.14	9.73	+1,366	29	4	11
Administrative County														
	8,203	7,757	15,960	16.49	16.49	187	11.58	10,124	10.46	9.52	+5,836	148	25	71

\* 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 15.82 and 13.27, the neo-natal mortality rates for the urban and the rural districts respectively were 11.07 and 9.95 and the early neo-natal mortality rates for the urban and rural districts respectively were 9.41 and 8.75.



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 1965, 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.										Violence.						
	Vascular lesions of nervous system.		Coronary disease, angina.		Hypertension with heart disease.		Other heart disease.		Other circulatory disease.		Pulmonary Tuberculosis.		Respiratory diseases (Non-Tuberculous).		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			No.	Rate per 1,000	No.	Rate per 1,000	
M.B. and Urban.	Banstead...	77	1.83	106	2.52	10	.24	71	1.69	30	.71	2	.05	59	1.41	3	.07	19	.45	9	.21	5	.12	74	1.76	14	.33
	Caterham and Warlingham	39	1.06	78	2.13	7	.19	49	1.34	16	.44	4	.09	34	.83	5	.14	14	.38	5	.14	—	—	35	.95	14	.38
	Chertsey...	41	.94	84	1.92	4	.09	35	.80	19	.44	4	.09	45	1.03	7	.16	26	.60	6	.14	3	.07	34	.78	14	.32
	Dorking...	35	1.51	61	2.63	4	.17	39	1.68	11	.47	1	.04	27	1.16	4	.17	14	.60	7	.30	2	.09	39	1.08	8	.34
	Egham...	43	1.37	54	1.72	3	.10	41	1.30	11	.35	1	.03	35	1.11	4	.13	16	.51	13	.41	3	.10	35	1.11	11	.35
	Epsom and Ewell	133	1.85	186	2.58	15	.21	114	1.58	51	.71	1	.01	188	2.61	13	.18	47	.65	19	.26	8	.11	90	1.25	36	.50
	Essex...	86	1.38	103	1.65	18	.29	89	1.42	33	.53	1	.02	56	.90	15	.24	33	.53	18	.29	3	.05	75	1.20	24	.38
	Farnham...	53	1.80	81	2.74	3	.10	58	1.97	20	.68	—	—	55	1.86	7	.24	17	.58	10	.34	1	.03	35	1.19	22	.75
	Frimley and Camberley	27	.70	53	1.37	2	.05	15	.39	7	.18	1	.03	23	.60	3	.08	14	.36	5	.13	2	.05	29	.75	14	.36
	Godalming	27	1.52	57	3.22	1	.06	11	.62	3	.17	—	—	15	.85	6	.34	7	.40	3	.17	2	.11	15	.85	5	.28
	Guildford	68	1.24	126	2.30	6	.11	52	.95	36	.66	1	.02	60	1.09	13	.24	18	.33	22	.40	4	.07	64	1.17	25	.46
	Haslemere	24	1.82	37	2.80	1	.08	18	1.36	7	.53	—	—	21	1.59	2	.15	7	.53	6	.45	1	.08	23	1.74	6	.45
	Leatherhead	44	1.17	83	2.21	1	.03	46	1.33	25	.67	—	—	32	.85	8	.21	23	.61	10	.27	1	.03	36	.96	16	.43
	Reigate	112	2.02	117	2.11	14	.25	59	1.06	32	.58	1	.02	75	1.35	11	.20	26	.47	10	.18	5	.09	53	.96	21	.38
	Staines	43	.80	103	1.91	4	.07	60	1.12	28	.52	2	.04	58	1.08	8	.15	37	.69	5	.09	1	.02	41	.76	16	.30
	Sunbury-on-Thames	42	1.10	71	1.86	3	.08	45	1.18	23	.60	1	.03	36	.95	5	.13	14	.37	8	.21	2	.05	31	.81	18	.47
	Walton and Weybridge	86	1.75	98	1.99	5	.10	44	.89	26	.53	3	.06	61	1.24	6	.12	24	.49	8	.16	3	.06	53	1.08	16	.32
	Woking	112	1.47	141	1.85	12	.16	107	1.41	35	.46	7	.09	84	1.10	11	.14	31	.41	16	.21	7	.09	55	.72	34	.45
	Total	1,092	1.41	1,639	2.11	113	.15	953	1.23	413	.53	27	.03	964	1.24	131	.17	387	.50	180	.23	53	.07	817	1.05	314	.40
	Rural.	Bagshot...	22	1.23	27	1.51	3	.17	22	1.23	7	.39	—	—	18	1.00	3	.17	12	.67	4	.22	3	.17	20	1.12	9
Dorking and Horley		37	1.09	70	2.06	3	.09	39	1.15	15	.44	3	.09	29	.85	7	.21	21	.62	3	.09	2	.06	28	.82	16	.47
Godstone...		69	1.59	118	2.72	6	.14	45	1.04	23	.53	2	.05	62	1.43	6	.14	21	.48	13	.30	3	.07	50	1.15	21	.48
Guildford		77	1.37	117	1.92	6	.10	45	.74	26	.43	3	.05	56	.92	12	.20	32	.53	12	.20	6	.10	58	.95	24	.39
Hambleton		61	1.68	83	2.29	2	.06	47	1.30	28	.77	1	.03	41	1.13	5	.14	29	.80	6	.17	1	.03	35	.97	14	.39
Total		266	1.38	415	2.16	20	.10	198	1.03	99	.51	9	.05	206	1.07	33	.17	115	.60	38	.20	15	.08	191	.99	84	.44
Administrative County 1965		1,358	1.40	2,054	2.12	133	.14	1,151	1.19	512	.53	36	.04	1,170	1.21	164	.17	502	.52	218	.23	68	.07	1,008	1.04	398	.41
Percentage of Total Deaths in 1965		13.41 (12.97)		20.29 (19.98)		1.31 (1.30)		11.37 (10.91)		5.06 (5.10)		0.36 (0.23)		11.56 (11.40)		1.62 (2.00)		4.96 (5.50)		2.15 (2.30)		0.67 (0.62)		9.96 (9.90)		3.93 (4.18)	

The figures in brackets relate to the year 1964.

## ADMINISTRATIVE COUNTY OF SURREY.

## Causes of Death at Different Periods of Life, 1965.

The causes of all deaths during 1965 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.	3,816	113	26	37	74	152	1,107	927	1,380	1,017	26	6	6	18	42	288	262	369		
	F.	4,359	87	17	22	31	112	667	858	2,565	932	18	8	2	4	20	161	210	509		
1. Tuberculosis, Respiratory ..	M.	15	—	—	—	2	1	7	4	1	6	—	—	—	—	1	2	2	1		
	F.	12	—	—	—	—	—	4	5	3	3	—	—	—	—	—	2	—	—		
2. Tuberculosis, Other ..	M.	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—		
	F.	2	—	—	—	—	—	—	1	1	1	—	—	—	—	1	—	—	—		
3. Syphilitic Disease ..	M.	11	—	—	—	—	—	5	2	4	2	—	—	—	—	—	1	1	—		
	F.	9	—	—	—	—	—	2	3	4	—	—	—	—	—	—	—	—	—		
4. Diphtheria ..	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
5. Whooping Cough ..	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
6. Meningococcal Infections ..	M.	1	—	—	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—		
	F.	1	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
7. Acute Poliomyelitis ..	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
8. Measles ..	M.	2	—	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	2	—	2	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
9. Other Infective and Para- sitic Diseases ..	M.	6	—	1	—	—	1	2	2	—	3	—	—	—	—	1	2	—	—		
	F.	10	1	2	—	—	—	2	—	5	3	—	—	—	—	—	2	—	1		
10. Malignant Neoplasm, Stomach	M.	71	—	—	—	—	3	29	21	18	16	—	—	—	—	2	7	3	4		
	F.	60	—	—	—	—	1	13	14	32	17	—	—	—	—	—	5	5	7		
11. Malignant Neoplasm, Lung, Bronchus	M.	301	—	—	—	—	5	139	107	50	91	—	—	—	—	3	52	23	13		
	F.	86	—	—	—	—	2	40	22	22	24	—	—	—	—	—	12	7	5		
12. Malignant Neoplasm, Breast	M.	2	—	—	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—		
	F.	178	—	—	—	—	11	87	39	41	38	—	—	—	—	4	16	7	11		
13. Malignant Neoplasm, Uterus	M.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—		
	F.	53	—	—	—	—	7	23	8	15	15	—	—	—	—	1	10	1	3		
14. Other Malignant and Lymphatic Neoplasms	M.	391	—	4	2	5	23	133	94	130	112	—	—	—	—	7	35	32	38		
	F.	426	1	1	3	4	18	122	101	176	79	—	2	—	—	3	25	18	31		
15. Leukæmia, Aleukæmia ..	M.	14	—	1	1	—	4	2	2	4	7	1	—	—	1	—	3	1	1		
	F.	36	—	1	2	1	6	7	11	8	7	—	—	1	—	—	1	3	2		
16. Diabetes ..	M.	28	—	—	—	—	2	6	8	12	7	—	—	—	—	—	3	2	2		
	F.	37	—	—	—	—	1	3	14	19	9	—	—	1	—	—	—	3	5		
17. Vascular Lesions of Nervous System	M.	396	—	—	1	—	10	82	100	203	119	—	—	—	—	1	17	35	66		
	F.	696	—	—	—	—	6	66	141	483	147	—	—	—	—	1	21	36	89		
18. Coronary Disease, Angina ..	M.	944	—	—	—	—	36	375	267	266	252	—	—	—	—	6	91	89	66		
	F.	695	—	—	—	—	6	75	179	435	163	—	—	—	—	—	21	54	88		
19. Hypertension with Heart Disease	M.	39	—	—	—	—	—	4	16	19	6	—	—	—	—	—	1	3	2		
	F.	74	—	—	—	—	—	4	20	50	14	—	—	—	—	—	—	5	9		
20. Other Heart Disease ..	M.	322	1	1	—	2	2	38	54	224	76	—	—	—	1	—	11	9	55		
	F.	631	—	—	—	2	9	39	79	502	122	—	—	—	—	2	9	14	97		
21. Other Circulatory Disease ..	M.	181	—	—	—	1	7	46	43	84	52	—	—	—	1	—	15	10	26		
	F.	232	—	—	1	1	2	20	38	170	47	—	—	—	—	—	3	7	37		
22. Influenza ..	M.	3	—	—	—	—	—	—	1	2	—	—	—	—	—	—	—	—	—		
	F.	6	—	1	—	—	—	—	2	3	2	—	—	—	—	—	—	1	1		

Continued overleaf



## ADMINISTRATIVE COUNTY OF SURREY—continued.

## CAUSES OF DEATH AT DIFFERENT PERIODS OF LIFE, 1965—continued.

The causes of all deaths during 1965 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-		
23. Pneumonia .. .. .	M. F.	226 328	15 8	5 2	4 3	7 4	5 4	36 24	41 56	113 227	49 55	2 1	1 2	1 —	— —	6 1	14 10	25 40			
24. Bronchitis .. .. .	M. F.	250 90	5 1	1 —	2 1	— 1	1 1	67 13	83 24	91 49	60 29	— —	— —	— —	3 1	10 3	24 10	23 15			
25. Other Diseases of Respiratory System .. .. .	M. F.	39 31	1 3	— —	— —	— 1	— 1	14 3	6 5	18 18	7 6	— —	— 1	— —	1 —	1 1	1 1	4 3			
26. Ulcer of Stomach and Duodenum .. .. .	M. F.	35 14	— —	— —	— —	— —	— —	6 1	11 5	18 8	5 4	— —	— —	— —	1 —	— 2	1 —	3 2			
27. Gastritis, Enteritis and Diarrhoea .. .. .	M. F.	15 23	1 2	2 —	1 —	1 —	— —	2 6	5 4	3 11	2 8	1 —	— 1	— —	— —	— 4	— 1	1 2			
28. Nephritis and Nephrosis .. .. .	M. F.	16 15	— —	— —	1 —	1 —	2 3	3 3	5 5	4 4	6 5	— —	— —	— —	1 —	2 1	1 2	2 2			
29. Hyperplasia of Prostate .. .. .	M. F.	23 —	— —	— —	— —	— —	— —	1 —	3 —	19 —	5 —	— —	— —	— —	— —	— —	— —	5 —			
30. Pregnancy, Childbirth, Abortion .. .. .	M. F.	— 2	— —	— —	— —	— 1	— 1	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —	— —			
31. Congenital Malformations .. .. .	M. F.	38 35	19 20	2 2	6 3	2 3	2 1	5 5	1 —	1 1	6 8	5 4	— —	— —	— —	1 4	— —	— —			
32. Other Defined and ill-defined Diseases .. .. .	M. F.	269 434	69 49	3 3	4 4	7 7	18 19	47 60	39 59	82 233	79 89	14 13	3 1	— —	1 —	5 10	20 16	7 49			
33. Motor Vehicle Accidents .. .. .	M. F.	90 42	— —	2 —	5 2	37 2	12 3	23 16	6 7	5 12	23 7	— —	— —	4 2	8 —	6 —	2 3	1 1			
34. All Other Accidents .. .. .	M. F.	48 50	2 2	4 2	8 3	6 —	7 2	11 6	3 9	7 26	19 18	3 —	2 1	1 —	2 —	4 3	4 6	1 8			
35. Suicide .. .. .	M. F.	36 48	— —	— —	— —	3 4	10 7	20 23	2 7	1 7	6 11	— —	— —	— —	2 2	1 5	2 2	— —			
36. Homicide and Operations of War .. .. .	M. F.	3 1	— —	— —	— —	— —	1 1	1 —	— —	1 —	1 1	— —	— —	— —	1 1	— —	— —	— —			



### Infectious Diseases : Notifications and Deaths.

The following table shows the incidence of infectious disease in the County during the year 1965, giving the number of cases of each disease notified and the attack rate :—

Disease.	1965	
	Number of cases notified.	Attack-rate per 1,000 population.
Acute encephalitis—		
Infective ... ..	—	—
Post infectious ... ..	1	0.001
Acute pneumonia ... ..	110	0.11
Acute poliomyelitis—		
Paralytic ... ..	1	0.001
Non-paralytic ... ..	—	—
Diphtheria ... ..	—	—
Dysentery ... ..	351	0.36
Enteric or Typhoid fever ... ..	3	0.003
Erysipelas ... ..	26	0.03
Food poisoning ... ..	98	0.10
Measles, excluding Rubella ... ..	11,973	12.37
Meningococcal infection ... ..	4	0.004
*Ophthalmia neonatorum ... ..	—	—
Paratyphoid fever ... ..	5	0.005
†Puerperal pyrexia ... ..	126	7.80
Scarlet fever ... ..	344	0.36
Tuberculosis—Pulmonary ... ..	161	0.17
Non-pulmonary ... ..	38	0.04
Whooping cough ... ..	226	0.23

\* Rate per 1,000 live births.

† Rate per 1,000 live and still births.

The paralytic poliomyelitis case was an unmarried male aged 22 and was a resident member of the staff of an hotel. As the clinical findings and history were in favour of a diagnosis of poliomyelitis, the patient was immediately transferred to an Isolation Hospital. Further observation in hospital and clinical and C.S.F. findings confirmed the tentative diagnosis.

All members of the staff of the hotel, whether resident or not, were regarded as contacts and given personal and written advice, and advised to have oral polio vaccine immediately; all guests resident in the hotel were given the same advice, and 89 staff and residents received oral vaccine at the hotel. In addition, all those guests resident in the hotel at any time during the patient's illness, the patient being ambulant all the time, were regarded as contacts.

The patient had not been in contact with any known cases of poliomyelitis. He had been vaccinated with three doses of Salk vaccine in Lincolnshire in 1959-60, and had only moved to Surrey in September, 1965.

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

Measles ... ..	4
Whooping Cough ... ..	—
Diphtheria ... ..	—
Influenza ... ..	11
Meningococcal infection ... ..	2
Acute Poliomyelitis ... ..	—

### Tuberculosis.

#### NOTIFICATIONS.

The summary of returns for 1965 from the Medical Officers of Health of County Districts shows that primary notifications were received in respect of 161 cases of pulmonary tuberculosis and 38 cases of non-pulmonary tuberculosis during the year.

The case rates for Surrey, compared with those for England and Wales in 1965, were as follows:—

	Surrey.	England and Wales.
Pulmonary Tuberculosis ... ..	0.17 per 1,000	0.28 per 1,000
Non-Pulmonary Tuberculosis ... ..	0.04 per 1,000	0.05 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 ... ..	—	—	—	—	—
One and under 2 years ... ..	1	1	—	—	2
2 " " 5 " " " " " " " "	—	2	1	—	3
5 " " 10 " " " " " " " "	3	1	—	—	4
10 " " 15 " " " " " " " "	—	1	—	—	1
15 " " 20 " " " " " " " "	6	3	1	1	11
20 " " 25 " " " " " " " "	8	1	2	2	13
25 " " 35 " " " " " " " "	14	15	2	4	35
35 " " 45 " " " " " " " "	18	10	3	8	39
45 " " 55 " " " " " " " "	21	7	2	4	34
55 " " 65 " " " " " " " "	23	3	1	4	31
65 " " 75 " " " " " " " "	9	4	—	1	14
75 and upwards ... ..	6	4	—	2	12
Totals ... ..	109	52	12	26	199

The number of patients on the registers who had a positive sputum within the last six months of 1965 was 54.

## DEATHS.

The numbers of deaths and the death rates for pulmonary tuberculosis and other forms of tuberculosis in 1965 were as follows:—

Pulmonary Tuberculosis.		Other forms of Tuberculosis.	
Deaths.	Death rate per 1,000 population.	Deaths.	Death rate per 1,000 population.
36	0.037	4	0.004

Provisional death rates for England and Wales in 1965 were as follows:—

Pulmonary tuberculosis	...	...	0.042 per 1,000
------------------------	-----	-----	-----------------

Non-Pulmonary tuberculosis	...	0.006 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 1965, 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 1965 some 120 tuberculous patients (of whom 106 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) ... ..	36	4	40
Deaths not allocated by the Registrar General (tuberculosis being one of the causes but not the sole or underlying cause) ... ..	22	—	22
Deaths not allocated by the Registrar General (tuberculosis not being one of the causes) ... ..	55	3	58
	<hr/> 113	<hr/> 7	<hr/> 120

There were 14 deaths of unnotified cases of tuberculosis in 1965 as follows :—

<i>In Hospitals.</i>	<i>At Home, etc.</i>	<i>Total.</i>
12	2	14



## 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, 1965, were as follows :—

						Pulmonary	Non-Pulmonary
Males ...	...	...	...	...	...	2,329	169
Females ...	...	...	...	...	...	1,595	293
Totals ...						3,924	462
Grand Total ...						4,386	



#### HEALTH VISITING

*Mothers are discussing with the Health Visitor in a Surrey clinic questions concerning their children's health.*



#### HOME NURSING

*The district nurse arrives to provide an injection at the home of an elderly Surrey patient.*





#### AUDIOMETRY

*An audiometrician gives a routine hearing test with the pure tone audiometer in a Surrey school.*



#### MENTAL HEALTH

*Trainees operating bench drilling machines on the production line at a Surrey training centre engaged in the making of components for electrical switch gear.*



## WORK OF THE COUNTY HEALTH DEPARTMENT.

Details of the work of the department are given in the subsequent sections of the Report.

### Capital Building Programme.

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

Project.	Purpose.	Date Completed.
Church Street, Epsom ... ..	Welfare Centre/School Clinic and Ambulance Station	February, 1965.
Berkshire Road, Camberley ... ..	Welfare Centre/School Clinic ... ..	September, 1965.
Victoria Road, Horley ... ..	Welfare Centre/School Clinic/two flats for nurses	October, 1965.
Bury Fields, Guildford... ..	Welfare Centre/School Clinic ... ..	October, 1965.
Molesey Road, Hersham ... ..	Welfare Centre/School Clinic ... ..	January, 1966.
Tattenham Crescent, Banstead ... ..	Welfare Centre/School Clinic ... ..	March, 1966.
Dorincourt, Woodham Rise, Horsell, Woking	Extension of provision for care of unmarried mothers and their babies	January, 1965.
Haslemere ... ..	Extension to Ambulance Sub-Station ...	December, 1965.
Hostel for Mentally Ill Persons, Wallington...	Adaptations of 75, Woodcote Road, Wallington as Hostel for employable persons suitable to live and work in the community	February, 1965, and premises handed over to Borough of Sutton on 1.4.65.
Temporary Junior and Adult Technical Training Centre, Frensham Road, Farnham	Temporary premises until purpose built centre is erected on site	March, 1966.

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

Project.	Purpose.	Present Position.
<b>1964-65 CAPITAL BUILDING PROGRAMME.</b>		
Hostel for the Elderly Confused, Godalming	Purpose built hostel for elderly mentally disordered persons unsuitable for admission to County Welfare Homes	Working drawings being prepared.
Sendhurst Grange Home for Sub-normal Children, Send	Adaptation of existing Home ...	Building work to commence in 1966.
Day Centre and Social Club, Waterloo Road, Epsom	Adaptations of Waterloo Road Clinic as Day Centre and Social Club to meet special needs of Epsom	Building work in progress.
<b>1965-66 CAPITAL BUILDING PROGRAMME</b>		
Walton Lodge, Banstead ... ..	Welfare Centre/School Clinic ...	Building work in progress.
<b>1966-67 CAPITAL BUILDING PROGRAMME</b>		
Woodfield Lane, Ashted ... ..	Welfare Centre/School Clinic/Nurses' Flats	Tenders to be invited following Ministry of Health agreement of revised cost limit.
Chobham ... ..	Welfare Centre/School Clinic ...	Sketch plans being prepared.
Gresham Road, Oxted ... ..	Welfare Centre/School Clinic ...	Sketch plans being prepared.
Giggs Hill Green, Thames Ditton ...	Welfare Centre/School Clinic ...	Sketch plans approved.
Civic Centre, Farnham ... ..	Health Centre ... ..	Tenders being invited.
St. John's, Woking ... ..	Health Centre ... ..	Sketch plans being prepared.
Shepperton ... ..	Health Centre ... ..	Sketch plans approved.
Stepsgates, Chertsey ... ..	Health Centre ... ..	Sketch plans approved.
Staines ... ..	Welfare Centre/School Clinic ...	Negotiating for a site.
Bletchingley Road, Merstham ...	Health Centre/Nurses' Flats ...	Sketch plans approved.
White House, Epsom ... ..	Flats/Training Home for District Nurses	Sketch plans approved.
Addlestone, Crouch Oak Lane ...	Flats for District Nurses ... ..	Purchase of house for conversion into flats is proceeding.
Caterham, Waller Lane ... ..	Flats for District Nurses ... ..	Working drawings being prepared.
Guildford ... ..	Main Ambulance Station ... ..	Site being sought.
Chelsham Road, Warlingham ...	Ambulance Station ... ..	Sketch plans being prepared.
Banstead ... ..	Ambulance Control, Training School, Store, etc.	Proceeding to tender.
Walton-on-Thames ... ..	Ambulance Sub-Station ... ..	Site acquired. Progress expected in 1967-68.
Chertsey ... ..	Control, Recreational and four-bay extension to main ambulance station	Negotiations for site almost completed.
Leatherhead ... ..	Ambulance Sub-Station ... ..	Site acquired.
Hostel for Adult Subnormal Males, Reigate/Horley	Purpose-built hostel ... ..	Site being sought.
Junior Training Centre, Guildford ...	Adaptations and extensions to existing centre	Work commenced May, 1966.



Project.	Purpose.	Present Position.
<b>1966-67 CAPITAL BUILDING PROGRAMME—<i>contd.</i></b>		
Hostel for Mentally Ill Females, Cheam	Adaptations to existing building ...	Scheme being prepared.
Adult Technical Training Centre, Hersham Road, Walton-on-Thames	Purpose-built centre ...	Scheme being prepared.
Adult Technical Training Centre, Walton Lodge Estate, Banstead	Purpose-built centre to replace existing temporary centre	Working drawings being prepared.
Junior Training Centre, Queens Road, Walton-on-Thames	Purpose-built centre to replace existing unsuitable premises	Working drawings being prepared.
Hostel for Adult Subnormal, Laleham Road, Shepperton	Purpose-built hostel. Project transferred from Middlesex County Council	New scheme being prepared.
Hostel for Adult Subnormal Females, High Street, West Molesey	Purpose-built hostel ...	Working drawings completed.

### Fluoridation of Water Supplies.

Fluoridation of water supplies in the County was first considered by the Council in April, 1963, when a recommendation of the then County Health Committee that it should be introduced was referred back for further examination. Subsequent reports on the issue were submitted to the Council in July, 1963, and in January, 1964, when, at the suggestion of the County Health Committee, a final decision was deferred pending the outcome of a legal action which a private consumer intended to take against the Watford Corporation, seeking to restrain that authority from adding fluoride to the public water supplies.

Although, as a result of consultations which took place in 1963, 19 of the then 33 Surrey County District Authorities indicated that they were opposed to the principle of fluoridation of water supplies, the County Health Committee consistently maintained the view that the measure ought to be part of the Council's services for the prevention of illness and that, when introduced, it would play a major part in contributing to the health and well-being of future generations of children in Surrey. The County Health Committee were convinced:—

- (i) that fluoridation of the water supplies is effective in reducing the incidence of dental caries in children and that this reduction persists into adult life.
- (ii) that at the recommended rate of 1 part per million it involves no risk to health.
- (iii) that the minute variation in the concentration of fluoride in the water would involve no noticeable alteration in the character and quality of the water; and
- (iv) that there is no alternative means of administering fluoride which would be so effective, so convenient and so widespread in its application.

The Ministry of Health in Circular 12/63 gave a general approval to all local health authorities, pursuant to Section 28 of the National Health Service Act, 1946, to make arrangements with water undertakings for adjusting the level of fluoride in water supplies to the extent recommended without further reference to the Minister and without consulting other interested or voluntary bodies, including the District Authorities in the County as would normally be the case under Section 20 of the Act. If the principle of fluoridation was accepted it would be necessary to approach all the water undertakings serving the County to seek their agreement to the installation and operation of fluoridation plant. Where water undertakings serve the areas of other local health authorities in addition to Surrey, i.e., other Counties or London Boroughs, the consent of those authorities to the introduction of fluoride to the water supplies would also be needed.

The Ministry of Health estimated that the cost involved would be approximately 10d. per head of population per year, the cost to be defrayed by local health authorities pursuant to their powers under Section 28 of the National Health Service Act, 1946. The current level of expenditure on dental care of the Surrey Executive Council was approximately 30s. per head of population per year.

As stated in Circular 15/65 doubts which were previously expressed in some quarters as to the legality of adding fluoride to the public water supplies were largely dispelled by the decisions of the Privy Council in the case of the Attorney-General of New Zealand v. Lower Hutt Corporation, in which it was affirmed that water undertakings would not be acting *ultra vires* in adding fluoride to water supplies and that the water containing such additions would remain "wholesome" water.

Following the Privy Council's decision the case against the Watford Corporation was withdrawn. A further report which included Circular 15/65 was submitted to the Council in October, 1965. Paragraph 5 of this Circular stated that: "In the Minister's view fluoridation is now an established and well proven public health measure which confers benefits to dental (and, in consequence, general health greatly exceeding the cost of introducing it. He is convinced that it is completely safe. He hopes, therefore, that all local health authorities will now take steps to make arrangements for its introduction." The Circular affirmed (paragraph 6) that the Minister "is prepared to indemnify any local health authority or statutory water undertaking in England or Wales in the event of legal proceedings either on lack of powers or on damage to health. . . ."



At this meeting the County Council approved in principle the introduction of fluoride to water supplies. Following this recommendation, approaches were made to the individual water undertakings serving the County and further reports will be made to the Council on the outcome of these approaches together with estimates of the initial and annual expenditures that will be incurred.

### Prevention of Break-up of Families.

There were 402 families on the lists kept by Divisional Medical Officers and Medical Officers of Health of Delegated Districts at the end of 1965.

These 402 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 ... ..	179	44.5	Housewifery ... ..	101	25.1
2. <i>Material Needs.</i>			Care of Children ...	145	36.1
Housing ... ..	162	40.3	5. <i>Desertion.</i>		
Employment ... ..	80	19.9	Desertion by one Parent	48	11.9
Financial ... ..	237	59.0	6. <i>Delinquency.</i>		
3. <i>Physical, Mental and Psychological Disorders.</i>			Adult Delinquency and/or Imprisonment ...	52	12.9
Emotional Immaturity	87	21.6	Juvenile Delinquency (Real or potential) ...	36	9.0
Mental Illness ... ..	62	15.4	7. <i>Other Reasons</i> ... ..	19	4.7
Alcoholism and Drug Addiction ... ..	12	3.0			
Drunkenness ... ..	11	2.7			
Mental Subnormality ...	25	6.2			
Low Intelligence ... ..	86	21.4			
Physical Illness ... ..	76	18.9			

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 ... ..	179	44.5	4. Housewifery and Child Care ... ..	183	45.5
2. Material Needs ... ..	300	74.6	5. Desertion ... ..	48	11.9
3. Physical, Mental and Psychological Disorders	244	60.7	6. Delinquency ... ..	84	20.9
			7. Other reasons ... ..	19	4.7

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 ... ..	179	44.5	Nos. 1, 2 and 3 ... ..	83	20.6
Nos. 1 and 2 ... ..	132	32.8	Nos. 1 and 4 ... ..	75	18.7
Nos. 2 and 4 ... ..	125	31.1	Nos. 1, 2, 3 and 4 ... ..	40	10.0
Nos. 3 and 4 ... ..	120	29.9	Nos. 1, 2, 3, 4 and 5 ...	3	0.7
Nos. 1 and 3 ... ..	107	26.6	Nos. 1, 2, 3, 4, 5 and 6 ...	2	0.5

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 402 families 273 are known to the Health Visitors for their districts and, in addition, 502 families not registered as problem families were the subject of special surveillance by Health Visitors.



## CHILDREN OF PROBLEM FAMILIES.

At the end of 1965 there were 1,573 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.
1,573	69	30	20	5	124	7.9

## REHOUSING.

37 registered families were rehoused during the year.

## SPECIAL HOME HELPS.

During 1965, problem families received the services of special home helps amounting in all to 167 hours. In addition, 1,122 hours of service were given to other problem families by ordinary home helps.

At the end of the year 5 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 social workers for the chest clinics and for the prevention of the break-up of families was 12 medical social workers, 3 with a general training and 1 welfare assistant. Whereas the establishment of medical social workers was fully maintained during the year, difficulty was experienced in filling the vacancies for the general-trained. The work of the social workers is reflected in the items and tables on pages 19-20 and 45-46.

## TRAINING HOMES.

Two problem families were admitted to Frimhurst Recuperative Home at Frimley for training. Recuperative holidays were arranged for three families.

## CHILDREN AND YOUNG PERSONS ACT, 1963.

This enactment was implemented by the Council as from 1st October, 1963. Under 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." To this end the Children's Committee authorised grants and loans to a number of families during the year. This financial assistance was made for a wide variety of reasons, chief of which were arrears of rent and/or rates, payment of gas, water and electricity bills, arrears of hire purchase payments and cash deposits on equipment, etc.

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 2,636.

### Cervical Cytology.

The condition of carcinoma in situ has been known since 1940. There is a considerable time lag before this condition becomes invasive. However, when a lesion is found the length of time it has been present is not known and the time interval may therefore be considerably shortened. Early detection of carcinoma in situ should reduce the death rate from invasive carcinoma of the cervix.

The symptoms of in situ carcinoma of the cervix are none and therefore diagnostic tests are used. One of these is cytology in the form of a cervical smear. Since October, 1964, it has been possible to take at the Caterham Family Planning Clinic a few cervical smears for screening. This was due to the help and co-operation of the Royal Marsden Hospital, London, who agreed to report on these smears. There was a quick response from patients and general practitioners alike.

Since the beginning of 1965 the Royal Marsden Hospital have agreed to take for examination ten smears each week and a special service was started for this purpose.

In the year 267 smears have been taken and the results, as follows, have proved the necessity for this service.

Grade 1	...	...	...	238	(18 of these so graded after repeat smears—originally Grade 2.)
Grade 2	...	...	...	18	
Grade 3	...	...	...	9	This patient was, in fact, found to have invasive carcinoma.
Grade 4	...	...	...	1	
Grade 5	...	...	...	1	

The grading used is as follows:—

- Grade 1 No abnormality in cells.
- Grade 2 Evidence of infection but no abnormality—infection is treated by general practitioner and then smear repeated.
- Grade 3 Cells suspicious of malignancy—referred to Royal Marsden for enzyme tests and possible cone biopsy. We repeat smears at six monthly intervals.
- Grade 4 Cells probably malignant—referred to Royal Marsden for possible hysterectomy and radium.
- Grade 5 Cells definitely malignant. Referred to Royal Marsden for treatment.

### Medical Arrangements for Long-Stay Immigrants.

At the beginning of the year the Ministry of Health notified the Council of the following steps to be taken to deal with the rather special problems which arise in connection with the health and treatment of long-stay immigrants to this country:—

At ports of arrival long-stay immigrants, both Commonwealth and Alien, who are referred to medical inspectors are given a hand-out printed card in languages which they are likely to understand, the aim of which is to encourage them to get on to the list of a medical practitioner in their place of residence so that (if he thinks it desirable) he can arrange for them to go to a mass radiography unit, a chest clinic or a hospital for X-ray.

Long-stay immigrants who are referred to medical inspectors at the ports are also asked to provide their destination addresses and these are sent to the Medical Officer of Health of the county or county borough concerned, with a request that he attempts to persuade the immigrants to act on the advice they have been given in the hand-out. Copies of the hand-out are also required to be held by Medical Officers of Health and local officers of the Ministries of Labour and Pensions and National Insurance, in case they come into contact with immigrants who have not received one or apparently lost it.

These procedures are to help ensure that long-stay immigrants register with general practitioners at an early stage of their life in this country and do not wait until they fall ill. It also helps to make sure that those for whom it is appropriate, have an X-ray at an early stage.



The following table shows the number of advice notes received during the year from ports and airports relating to the arrival of immigrants into the County together with the number of first successful visits paid and the number of pulmonary tuberculosis notifications received in respect of such immigrants.

COUNTRY where passport was issued (as stated by Port Health Authority).	Number of advice notes* received during the year from ports and airports relating to arrival of immigrants.	Number of first† successful visits paid to immigrants during the year.	Number of pulmonary tuberculosis notifications received in respect of immigrants whose advice notes were received during the year.
Commonwealth Countries :—			
Caribbean ... ..	44	34	1
India ... ..	38	26	—
Pakistan ... ..	43	32	—
Other Asian ... ..	18	9	—
African ... ..	26	14	—
Other ... ..	25	17	—
Non-Commonwealth Countries :—			
European ... ..	1,118	843	—
Other ... ..	9	5	—
Total ... ..	1,321	980	1

\* Advice of arrival of immigrant.

† First successful visit means the first time the Council's Health Visitor established contact with the immigrant.

## 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 1965 including any births registered but not notified and properly belonging to the County :—

COUNTY DISTRICT AUTHORITY.	NUMBER BORN IN 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.									
	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.	At Home.	Private Nursing Home.	
<b>M.B. and Urban</b>															
Banstead ... ..	130	—	—	—	—	—	—	—	1	—	—	249	1	—	116
Caterham and Warlingham... ..	172	—	—	—	—	—	1	—	—	1	—	306	11	73	
Chertsey ... ..	220	—	—	—	—	—	1	—	—	—	—	618	1	19	
Dorking ... ..	77	55	232	1	69	145	1	12	136	—	—	74	—	8	
Egham ... ..	119	—	—	1	—	—	—	—	—	—	—	227	10	89	
Epsom and Ewell ... ..	230	—	619	—	—	604	—	—	493	1	—	2	—	428	
Esler ... ..	190	—	—	—	—	—	—	—	—	—	—	517	5	72	
Farnham ... ..	61	—	276	—	—	198	1	—	183	—	—	14	—	98	
Frimley and Camberley ... ..	176	—	277	—	—	7	—	—	170	—	—	186	—	308	
Godalming ... ..	48	—	—	—	—	—	1	—	—	—	—	240	4	320	
Guildford ... ..	142	66	678	—	332	1,104	—	39	131	—	—	9	—	8	
Haslemere ... ..	12	—	126	—	—	71	—	—	224	—	—	20	1	4	
Leatherhead ... ..	161	—	—	1	—	—	1	—	—	1	—	345	—	156	
Reigate ... ..	95	—	695	—	—	931	—	—	265	—	—	12	3	7	
Staines ... ..	361	—	—	—	—	—	—	—	—	2	—	71	1	20	
Sunbury ... ..	310	—	—	—	—	—	—	—	—	—	—	117	1	605	
Walton and Weybridge ... ..	132	—	462	—	—	190	—	—	32	—	—	138	2	336	
Woking ... ..	365	—	877	—	—	920	—	—	24	—	—	104	3	792	

The percentage of confinements taking place in hospitals was 74.32, in private nursing homes 3.33, and at home 22.35.



The number of births to Surrey mothers which took place in the homes, in private nursing homes and in hospitals in 1965 was 3,594, 535 and 11,957 respectively. The total registered live and still births was 16,147.

The number of early discharges from hospital in the County has been as follows :—

Division.	1965
North-Western ...	699
South-Eastern ...	487
Northern ...	207
South-Western ...	1,010
Epsom & Ewell ...	86
Esher ...	136
Woking ...	206
Total ...	2,831

In previous reports I have commented on the poor selection of patients for hospital confinements.

Since the "high parity" mothers carry the highest risk, first attempts should be directed at attracting as many of them into hospital as possible. In view of the very much smaller numbers of "high parity" confinements, only a slightly more strict selection of low parity mothers would ensure a far higher proportion of "high parity" confinements to take place in hospital.

Of the "high risk" high parity mothers no less than 23.08 per cent were confined at home while 53.4 of the "safe" low parity mothers were confined in hospital.

The women selected for domiciliary confinement are already in general "safer" than those selected for hospital confinement. With better selection, domiciliary confinement could be made even safer.

At the present time, when the number of maternity beds is insufficient to deal with the greatly expanding number of births each year, a proportion of early discharges are probably inevitable but when they are necessary they should be limited to as small a number as possible, should be carefully selected and ample warning should be given both to the woman and to the local health authority so that proper arrangements can be made for her reception back in the home.

#### 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 ...	284	13	62	160	5	—	227
South-Eastern ...	1,089	52	118	681	—	50	849
Northern ...	353	5	130	45	—	—	175
South-Western ...	629	147	—	—	—	152	152
Epsom and Ewell ...	613	86	50	146	—	—	196
Esher ...	124	23	67	252	—	—	319
Woking ...	613	145	101	256	—	—	357
Total ...	3,705	471	528	1,540	5	202	2,275

##### 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 ...	394	34	428	2,152
South-Eastern ...	371	104	475	2,173
Northern ...	352	104	456	3,057
South-Western ...	478	39	517	4,969
Epsom and Ewell ...	100	8	108	522
Esher ...	138	30	168	798
Woking ...	252	55	307	1,124
Total ...	2,085	374	2,459	14,795



Ante-Natal clinics are provided throughout the County by the County Council in their clinic buildings or in other premises, the aim being to provide a widely-distributed service which shall be readily available for expectant mothers and which will preclude the need for long journeys to the hospital clinics especially in the latter months of pregnancy. Each County Council clinic is under the charge of a medical officer of special experience, assisted by one or more health visitors and usually also by one or more midwives; in addition, midwives frequently hold ante-natal sessions for their own cases at these clinic buildings.

In districts where no special ante-natal clinics are held, the Assistant Medical Officers are available for ante-natal consultations at the ordinary infant welfare centres.

Mothers are encouraged to attend also at these clinics after their confinement to make sure that full health and normality is restored or that any necessary treatment is obtained. The service provided by the ante-natal clinic is additional to and intended to supplement that which every expectant mother is entitled to receive from her general practitioner and midwife.

In previous reports I have discussed the functions of, and facilities available at, the County Council's ante-natal clinics and it is only necessary here for me to say that over and above the Mothercraft and Relaxation Classes conducted by Health Visitors and Midwives throughout the County, the National Childbirth Trust organised classes on psychoprophylactic training for childbirth. It was felt that midwives and health visitors should be conversant with this teaching, and three study week-ends were arranged in co-operation with the trust, and 60 members of staff attended.

The figures relative to ante-natal sessions and attendances in 1965 were :—

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.
61	129	3,539	6,164	12,164	15,151

The number of women attending the County Council's ante-natal clinics form 38.2 per cent of the total births in the County. However, 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.

#### 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. During the year, 72 Surrey cases were admitted to mother and baby homes situated within the County provided by Voluntary Organisations, while 44 were sent by the Council to other Homes, payment being made *per caput*.

In addition, 85 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 1965 was 2, which gives a maternal mortality rate of 0.12 per thousand live and still births which is less than the rate of 0.25 for England and Wales. A comparison with previous years will be found under "Vital Statistics" on page 7.

Both of the deaths occurred in hospital.



### Puerperal pyrexia.

During 1965, 156 cases of puerperal pyrexia were notified representing an attack rate of 9.66 per thousand live and still births as compared with 5.91 for England and Wales. Of these cases 13 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 1.04 in domiciliary practice and 11.45 in institutional practice (including hospitals and private nursing homes).

### Infant mortality.

The infant mortality rate in the Administrative County of 15.29 compares with 19.0 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 1965—namely 15.82 (200 deaths)—is higher than the rural rate—namely 13.28 (44 deaths).

### Prematurity.

The following table gives details of premature births and still births notified in the County during the year 1965 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.	In hospital.	At home or in a Nursing Home.	
(a) 2 lb. 3 oz. or less (1,000 gms. or less.)	33	22	4	1	2	—	2	—	4	2	1	1	14	1
(b) Over 2 lb. 3 oz. up to and including 3 lb. 4 oz. ... (1,001-1,500 gms.)	70	26	8	1	4	3	—	—	—	—	—	—	30	2
(c) Over 3 lb. 4 oz. up to and including 4 lb. 6 oz. ... (1,501-2,000 gms.)	134	16	5	4	9	1	—	—	3	—	—	1	30	—
(d) Over 4 lb. 6 oz. up to and including 4 lb. 15 oz. ... (2,001-2,250 gms.)	143	5	2	—	9	—	—	—	1	1	—	—	9	2
(e) Over 4 lb. 15 oz. up to and including 5 lb. 8 oz. ... (2,251-2,500 gms.)	345	6	6	2	76	1	—	—	3	—	—	—	19	—
Totals ...	725	75	25	8	100	5	2	—	11	3	1	2	102	5

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 ...	15,960	15,124	836
Deaths among live births in the first month of life ...	173	52	121
Still births ...	187	80	107

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

It will be seen that the 15,124 non-premature live births produced 52 neo-natal deaths and the 836 premature live births produced 121 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 1965 midwives sought medical aid for suspected cases of ophthalmia neonatorum in respect of 54 babies but no cases were notified by medical practitioners as suffering from ophthalmia neonatorum.

### Infant Welfare Centres.

The County Council maintained 161 infant welfare centres in the year. Additional centres were started at (i) Lyne Club, Lyne, Near Chertsey; (ii) S.C.C. Clinic, Buryfields, Guildford; (iii) Cygnet Youth Club, Leatherhead; (iv) Markwick Hall, Puttenham; (v) Community Centre, Brocks Drive, Fairlands, Guildford; (vi) Mayford Village Hall, Woking, and the centre at 10-12, Stoke Road, Guildford was closed.

The following table shows the attendance at the centres for the year 1965:—

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 1965.	Born in 1964.	Born in 1960-63.	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 ...	3,088	2,643	3,083	730	130	471	—	1,331	116	954
South-Eastern ...	2,873	2,769	4,068	1,504	374	20	—	1,898	32	4,270
Northern ...	1,719	1,593	1,819	803	161	—	—	964	64	1,582
South-Western ...	3,475	3,015	3,995	1,686	157	—	—	1,843	325	981
Epsom and Ewell ...	827	830	1,757	158	—	245	—	403	22	952
Esher ...	752	708	760	170	52	199	—	421	—	952
Woking ...	1,224	1,241	1,945	432	—	50	—	482	50	241
Total ...	13,958	12,799	17,427	5,483	874	985	—	7,342	609	9,932

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 1965 and who were born in that year formed 87.46 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... ..	3	4	20	27
South-Eastern ... ..	11	1	35	47
Northern ... ..	5	2	1	8
South-Western... ..	2	6	44	52
Epsom and Ewell ... ..	2	—	4	6
Esher ... ..	3	—	4	7
Woking ... ..	1	2	11	14
Total ... ..	27	15	119	161

The number of children attending, the proportion of children born in the year who attended welfare centres and the number of attendances at infant welfare centres were as follows:—

Registered live births.	Total number of children attending in the year.	Total attendances of all children in the year.	Proportion of children born in the year who attended Welfare centres (%).
15,960	44,184	318,972	87.46

### Convalescent Treatment.

Expectant and nursing mothers and children under five recommended for convalescent treatment are sent to convalescent and holiday homes. During the year 11 children under the age of five years and 4 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 5 day nurseries with a total number of 210 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 1965 :—

National Dried Milk.			Cod Liver Oil.		A. & D. Tablets.		Orange Juice.	
Free.	2/4	4/-	Free.	1/-	Free.	6d.	Free.	1/6
909	46,196	8,871	716	12,442	87	20,189	4,057	314,829

*Non-coupon issues to Hospitals and Nurseries :—*

	National Dried Milk.	Cod Liver Oil.	A. & D. Tablets.	Orange Juice.
Hospitals ... ..	1,301	3	—	1,761
Nurseries ... ..	—	168	—	648

### Congenital Defects at Birth.

Since early 1963, arrangements have been made for particulars of children with congenital abnormalities to be notified to the Divisional Medical Officers at the time of the birth notification. The birth notification form is so worded that doctors and midwives can show whether or not there is an abnormality of the infant.

The Divisional Medical Officer of the area in which the baby lives is responsible for making any inquiries necessary to enable the Registrar General's form to be completed. Returns of information received are made monthly to the Registrar General.

The health visitors receive early notification of the birth of children with congenital abnormalities in their areas and give special attention to these children in their visiting.

### Children "At Risk."

The number of children on the "at risk" register was 9,932 in 1965.

### 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 70.

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

Division/Delegated Authority	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. found to have impaired hearing but not necessitating hearing aid.			No. not fully assessed by end of year.			Total No. of examinations carried out at the Audiology Clinic during the 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	0-2	2-5	0-2	2-5	0-2	2-5	0-2	2-5
North-Western...	2,926	21	51	1	7	19	47	—	1	—	—	—	—	—	1	—	—	—	—	3	9	25	62	—	—
South-Eastern...	793	34	42	2	4	26	35	6	4	—	—	—	—	—	1	—	—	2	—	4	4	48	32	—	—
Northern...	1,582	13	51	N/A		9	49	—	—	—	—	—	—	—	1	—	—	—	—	3	1	14	59	—	—
South-Western...	3,851	45	80	1	10	40	72	—	5	—	—	—	—	—	5	—	—	—	—	6	8	50	98	—	—
Epsom and Ewell...	721	16	12	—	2	13	10	—	1	1	—	—	—	—	—	—	—	1	—	2	2	17	15	—	—
Esher...	215	6	8	1	2	5	8	—	—	—	—	—	—	—	—	—	—	—	—	2	2	7	11	—	—
Woking...	1,424	16	37	1	1	15	31	—	5	—	—	—	—	—	—	—	—	—	—	2	3	17	42	—	—
Total...	11,512	151	281	6	26	127	252	6	16	1	8	—	—	—	8	—	—	3	—	22	29	178	319	—	—



## 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 842 sessions. The number of new patients attending during the year was 1,557. 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.

## (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 ... ..	394	336	209
Children under 5 and not eligible for School Dental Service ... ..	1,770	1,221	994

## (b) Forms of treatment provided.

	Scalings and gum treatment.	Fillings.	Silver nitrate treatment.	Crowns or inlays.	Extrac- tions.	General anaes- thetics.	Dentures provided.		Radio- graphs.
							Full upper or lower.	Partial upper or lower.	
Expectant and Nursing Mothers ... ..	176	792	16	31	440	53	30	39	54
Children under 5 ... ..	—	2,669	611	4	707	307	—	—	28

**DOMICILIARY MIDWIFERY AND HOME NURSING.**  
**SUMMARY OF THE WORK OF THE DISTRICT NURSES,**  
**MIDWIVES, AND DISTRICT NURSE MIDWIVES, 1965.**

Division.	District staff establishment.	Total nursing cases.	Patients 0-5 years.	Patients 65+ years.	Total deliveries.	Number of cases delivered in hospitals, discharged and attended by domiciliary midwives before 10th day.	Total domiciliary visits.	Number of patients suffering from cancer.	Number of patients incontinent.
South-Western ...	63.4	4,087	117	704	644	1,010	117,234	311	241
North-Western ...	38.0	3,677	64	1,449	767	603	77,428	157	116
South-Eastern ...	54.0	3,193	106	2,208	779	521	121,771	300	310
Northern ...	25.4	1,245	26	712	655	242	46,126	91	30
Epsom and Ewell M.B.	15.0	906	4	654	210	86	30,099	69	51
Esher U.D.	15.5	1,168	19	710	209	136	37,352	85	29
Woking U.D.	17.0	913	11	554	375	193	27,350	47	44
H.Q. Relief ...	2.4	—	—	—	—	—	—	—	—
Total ...	230.7	15,189	347	8,991	3,639	2,791	457,360	1,060	821

Attention is drawn to the high proportion of the nurses' time which is spent with the over 65 age group. In 1965 59.2 per cent of the patients visited were in this age group.



## NURSING AUXILIARIES

It was decided to employ Nursing Auxiliaries on the district in order to relieve the qualified staff of unskilled nursing duties. After a carefully planned initiation period, in the training home and on the district, the auxiliary is attached to a group of nurses, and works under their guidance. The scheme has been successful, and it is intended to make further appointments.

## GROUP ATTACHMENT

During the year, some nurses were attached to groups of general practitioners, and it is hoped to make further attachments within the coming year.

## MIDWIVES BOOKED CASES TRANSFERRED TO HOSPITAL DURING LABOUR.

During 1965, there were 221 cases booked by the domiciliary midwives which were transferred to hospital during pregnancy or labour representing 6.21 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 ... ..	5	1	3	1
Mal-presentation ... ..	9	3	3	3
Early rupture of membranes ... ..	1	—	1	—
Foetal distress ... ..	11	3	8	—
Inertia ... ..	29	12	12	5
Toxaemia ... ..	7	3	3	1
Post-partum haemorrhage... ..	4	—	3	1
Prematurity ... ..	9	1	4	4
Retained placenta ... ..	9	—	6	3
Breech ... ..	7	2	4	1
Stillbirths ... ..	1	—	1	—
Post-Maturity ... ..	4	1	2	1
Disproportion ... ..	2	—	1	1
Intra-uterine distress ... ..	1	—	1	—
Partial placenta ... ..	1	—	1	—
Pyelitis ... ..	1	—	1	—
Twins ... ..	2	—	2	—
	103	26	56	21
(2) IN PREGNANCY.				
Ante-partum haemorrhage ... ..	7	1	6	—
Mal-presentation ... ..	3	1	—	2
Anaemia ... ..	2	—	2	—
Post-maturity ... ..	33	6	22	5
Rhesus factor ... ..	5	—	4	1
Toxaemia ... ..	29	10	14	5
Intra-uterine distress ... ..	1	1	—	—
Breech ... ..	4	2	1	1
Twins ... ..	4	1	3	—
Inertia ... ..	11	7	3	1
Pre-eclamptic toxaemia ... ..	8	4	4	—
Prematurity ... ..	5	1	2	2
Stillbirths ... ..	1	—	—	1
Social grounds ... ..	3	—	3	—
Miscellaneous ... ..	2	2	—	—
	118	36	64	18

## ANALYSIS OF NURSING CASES.

## (i) Principal Medical and Surgical Conditions.

Cases.	Total All ages.
Diseases of the heart ... ..	1,326
Circulatory ... ..	1,425
Diseases of the blood ... ..	1,409
Central nervous system ... ..	639
Chest conditions, medical and surgical ... ..	936
Abdominal, medical and surgical ... ..	3,803
Gynaecological, medical and surgical ... ..	791
Influenza ... ..	53
Rheumatic and arthritic diseases ... ..	898
Urinary, medical and surgical ... ..	369
Breast conditions, medical and surgical ... ..	281
Scald, burns and other injuries ... ..	454

(ii) *Other.*

Varicose ulcers ... ..	469
Miscarriages ... ..	81
Tuberculosis... ..	103
Pedicures ... ..	52
Diabetes ... ..	336
Diagnostic preparations ... ..	104
Orthopaedic, medical and surgical ... ..	478
Skin diseases, medical and surgical ... ..	208
Eye conditions ... ..	73
Ear, nose and throat, medical and surgical ... ..	368
Miscellaneous ... ..	1,111

## REFRESHER COURSES FOR MIDWIVES, DISTRICT NURSES AND HEALTH VISITOR

The requirements of the Central Midwives Board that midwives should attend approved refresher courses every five years was met by sending 26 midwives to courses at Hastings, Cheltenham, Nottingham, Oxford, Westcliff, Bangor, Bristol, London, Birmingham, 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.

## TRAINING OF STUDENT DISTRICT NURSES AND PUPIL MIDWIVES.

Part II pupil midwives are placed for training with approved teaching midwives by an arrangement with Part II Training Schools in the County.

District Nurse training is organised by the County Council and suitable candidates are sent to the Guildford and Surbiton Training Homes and to individual nurses approved for this training. The theoretical instruction is given at the Brooklands Technical College and the tutorials conducted at the Guildford and Surbiton Training Homes.

During the year 28 candidates were selected to take this course, 16 being sponsored by the County Council, 11 by London Boroughs and 1 by the Hampshire County Council. The sponsoring authority is responsible for the costs whether full training, lectures or tutorials are given.

## INCONTINENCE PADS.

The County Council provide a supply of pads to all district nurses for issue to incontinent patients receiving domiciliary care. These pads can also be supplied where the Nursing Officers are satisfied that the patient is receiving good care from relatives.

The disposal of used pads is normally only a problem where there is no open fire or solid fuel boiler. In such cases, paper sacks are provided by the County Council to contain the used pads. The sacks are of one ply natural and inner ply wax, and are sealed with small staples. After sealing they are put in the dustbin and removed by the local authority with other refuse.

During the year 821 incontinent patients were nursed by the domiciliary nurses.

## 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 five 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 1965 was 426.

## 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 ...	684
(b) Others ... ..	6

(ii) For cases in Institutions ... .. 353

Total ... .. 1,043



## NOTIFICATIONS FROM MIDWIVES.

The following notifications were received from midwives :—

Sending for medical aid	...	...	...	...	...	...	...	...	1,043
Stillbirths	...	...	...	...	...	...	...	...	53
Laying out dead body	...	...	...	...	...	...	...	...	4
Liability to be a source of infection (including pyrexia)	...	...	...	...	...	...	...	...	203
Death of mother or baby	...	...	...	...	...	...	...	...	25
Total	...	...	...	...	...	...	...	...	1,328

## 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)	...	51
Stillbirths	...	53
Liability to be source of infection (including pyrexia)	...	203
Death of mother or baby	...	25
Total	...	332

## Geriatric Visiting and Social Work.

## SUPPORTIVE SERVICES AVAILABLE FOR OLD PEOPLE IN THEIR OWN HOMES.

In addition to the work among geriatric patients undertaken by the general health visitors, there are three full-time health visitors and one part-time health visitor attached to the geriatric units in the County and one health visitor is attached to a group of general practitioners.

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.	
Guildford ... ..	49	599	163	284	—	152	27
Woking and Chertsey ...	159	424	352	30	10	32	—
Farnham (Surrey cases only) ... ..	73	134	91	11	21	11	—
Redhill (all cases) ...	216	997	659	334	—	4	35
Total ... ..	497	2,154	1,265	659	31	199	62

## TYPES OF VISIT.

Geriatric Health Visitor.	Home Visits.					
	First visits.		Revisits to Patients.	Visits to Relatives.	Miscellaneous.	Total.
	H.V.	H.V. and Dr.				
Esher... ..	20	—	45	28	20	113
Guildford ... ..	333	17	740	57	304	1,451
Woking and Chertsey ...	308	—	351	125	331	1,115
Farnham (Surrey cases only)	108	—	1,398	187	63	1,756
Redhill (Surrey cases only)...	176	23	2,701	103	262	3,265
Total ... ..	945	40	5,235	500	980	7,700

In addition, the general health visitors visited 1,544 old people during the year.

## CASES DEALT WITH WHO WERE :—

Geriatric Unit.	Admitted to Hospital.	Admitted to Nursing Home.	Admitted to Welfare Home or referred to Welfare Officer.	Hospital or Nursing Home to give relatives a rest.	Day Hospital.
Guildford ... ..	26	19	15	24	34
Woking and Chertsey ...	118	59	—	195	45
Farnham (Surrey cases only) ... ..	40	5	6	30	—
Redhill ... ..	607	—	18	71	—
Total ... ..	791	83	39	320	79

The health visitor appointed in 1962 continued to work with the general practitioners in the Epsom area, and details of her work are given below :—

## (a) No. of cases referred :—

General practitioners	...	...	...	...	...	...	...	...	283
Hospital Almoners	...	...	...	...	...	...	...	...	1
Other sources	...	...	...	...	...	...	...	...	2
Total	...	...	...	...	...	...	...	...	286

## (b) No. of home visits :—

First visit	...	...	...	...	...	...	...	...	39
With doctor...	...	...	...	...	...	...	...	...	13
Re-visits to patients	...	...	...	...	...	...	...	...	672
Visits to relatives	...	...	...	...	...	...	...	...	11
Miscellaneous	...	...	...	...	...	...	...	...	44
Total	...	...	...	...	...	...	...	...	779

## (c) Cases dealt with by admission to :—

Hospital	...	...	...	...	...	...	...	...	20
Nursing Home	...	...	...	...	...	...	...	...	7
Welfare Home	...	...	...	...	...	...	...	...	6
Total	...	...	...	...	...	...	...	...	33

## HEALTH VISITING.

The establishment of Health Visitors is 177.3, and at the end of the year the equivalent of 166.1 were available for duty. Nineteen students trained in the Surrey C.C. training course and of those 8 were appointed to the County staff, 3 returned to their sponsoring authorities, and 7 were appointed to the Greater London Boroughs who were part of the County prior to April 1965. The recruitment of trained staff has again proved to be most difficult.

## Health Visitor Attachment to General Practices.

During the year an increased number of enquiries were received from general practitioners concerning the possibility of attaching health visitors to their practices. In the light of experience it was felt that these requests should be granted wherever possible, as the Doctors and Health Visitors feel a better family service is thereby given.

At the time of writing this report (July 1966) the position was as follows :—

Division Delegated Authority	Number of Groups of General Practitioners.	Number of Doctors involved.	Approximate Practice Population.	Number of Health Visitors.
South-Western...	16	52	95,300	17
North-Western...	3	7	18,000	3
South-Eastern ...	1	3	6,000	1
Northern Division	—	—	—	—
Epsom and Ewell MB.	2	8	—	1 (Geriatric only)
Esher U.D.	—	—	—	—
Woking U.D.	—	—	—	—
Total ... ..	22	70	119,300	22



# 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, 1965		Live births 1965		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 1965 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	33	3,659	3,588	16,617	504	782	3,698	3,293	8,072	15,063
South-Eastern ...	2	34	3,575	3,455	16,059	473	1,411	3,692	3,835	10,582	18,109
Northern ...	1	15	1,823	1,817	9,135	609	143	1,526	1,141	3,000	5,667
South-Western ...	2	35	3,760	3,868	16,940	484	1,821	4,389	4,475	12,019	20,883
Epsom and Ewell ...	0.5	8	933	840	3,962	496	363	942	986	2,432	4,360
Essex ...	0.5	8	865	869	4,478	488	488	861	560	2,606	4,343
Woking ...	0.5	12	1,345	1,258	6,046	504	379	1,372	1,291	3,523	6,186
Relief Staff ...	—	10	—	—	—	—	—	—	—	—	—
Total ...	7.5	155	15,960	15,695	73,237	473	5,387	16,480	15,897	42,234	74,611

### The Health Visitors' Training Course.

This scheme was adopted by the County Health Committee in 1955 for training candidates to undertake service in the County as health visitors and the course now extends over one academic year.

Twenty-four students were selected to take the course, of these 15 were students sponsored by the Council, 2 sponsored by the Berkshire County Council, 4 sponsored by London Boroughs, 1 sponsored by the Channel Islands; and 1 was an independent student from the Commonwealth (Nigeria) and 1 an independent student with a scholarship.

All students sponsored by the County Council may be required to work in the County as Health Visitors for one year after completion of training.

### Other Duties of Health Visitors.

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

Their other duties include work in connection with problem families, health education, visiting the elderly in their homes and care and after care of the mentally subnormal in the community.

### NURSING HOMES.

During the year, the Committee approved the registration of 2 nursing homes. On the 31st December, 1965, there were 26 registered nursing homes.

### NURSERIES AND CHILD MINDERS REGULATION ACT, 1948.

At the end of the year 1965 the following number of premises and of persons had been registered :—

	Number registered.	Number of children provided for.
Premises ... ..	126	2,739
Daily Minders ... ..	166	—



## 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 1965.

District.	A. Number of children who completed a full course of primary immunisation during the year ended 31st December, 1965.							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, 1965.						
	Year of birth.					Others under 16.	Total.	Year of birth.					Others under 16.	Total.
	1965.	1964.	1963.	1962.	1958-61.			1965.	1964.	1963.	1962.	1958-61.		
<b>M.B. and Urban.</b>														
Banstead ... ..	215	197	12	3	2	—	429	—	95	166	44	174	64	543
Caterham and Warlingham...	211	284	13	10	23	4	545	—	11	28	2	276	306	623
Chertsey ... ..	274	403	50	17	38	35	817	—	21	163	52	488	597	1,321
Dorking ... ..	388	494	37	18	12	4	953	—	63	149	14	177	7	410
Egham ... ..	138	185	18	8	22	26	397	—	10	90	15	288	292	695
Epsom and Ewell ... ..	342	383	19	10	6	—	760	—	199	269	38	655	407	1,568
Esher ... ..	353	337	32	11	12	1	746	12	133	430	136	918	485	2,114
Farnham ... ..	190	84	11	2	160	214	661	5	31	63	18	347	699	1,163
Frimley and Camberley ...	384	570	23	17	29	123	1,146	—	85	166	61	410	458	1,180
Godalming ... ..	30	73	5	2	15	22	147	—	42	87	11	210	178	528
Guildford ... ..	91	258	204	23	47	37	660	3	28	75	19	638	610	1,373
Haslemere ... ..	80	94	8	8	11	5	206	—	14	29	12	135	80	270
Leatherhead ... ..	408	576	60	18	12	—	1,074	—	75	373	78	622	196	1,344
Reigate ... ..	402	332	25	6	10	3	778	—	193	245	34	551	293	1,316
Staines ... ..	395	499	81	10	70	36	1,091	—	165	269	58	627	304	1,423
Sunbury ... ..	528	405	10	7	17	14	981	—	187	365	42	749	394	1,737
Walton and Weybridge ...	273	402	25	13	53	37	803	—	128	95	46	446	364	1,079
Woking ... ..	292	544	112	22	32	29	1,031	—	135	309	69	632	172	1,317
<b>Rural.</b>														
Bagshot ... ..	80	119	10	5	9	10	233	—	6	35	3	124	127	295
Dorking and Horley ... ..	500	1,246	201	48	69	10	2,074	9	158	166	35	259	42	669
Godstone ... ..	234	246	21	13	11	127	652	—	46	93	18	160	71	388
Guildford ... ..	184	362	115	25	36	34	756	—	117	299	72	637	325	1,450
Hambledon ... ..	73	169	61	13	20	18	354	—	49	109	22	334	172	686
South-Eastern ... ..	131	129	21	1	2	—	284	—	30	16	6	20	33	105
South-Western ... ..	18	41	4	—	—	—	63	—	8	14	—	9	—	31
Total ... ..	6,214	7,932	1,178	310	718	789	17,141	29	2,029	4,103	905	9,886	6,676	23,628

There was no case 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.

District.	Vaccinated.								Re-Vaccinated.							
	Age—Months.				Years.				Age—Months.				Years.			
	—3.	3-6.	6-9.	9-12.	1.	2-4.	5-15.	Total.	—3.	3-6.	6-9.	9-12.	1.	2-4.	5-15.	Total.
Banstead ... ..	5	5	3	12	289	40	7	352	—	—	—	—	—	3	21	24
Caterham and Warling-																
ham ... ..	2	5	5	21	288	46	9	376	—	—	—	—	1	8	20	29
Chertsey ... ..	2	22	7	3	316	52	11	413	—	—	—	—	—	4	26	30
Dorking ... ..	3	—	—	—	92	60	3	158	—	—	—	—	—	1	5	6
Egham ... ..	6	5	4	18	148	67	6	254	—	—	—	—	1	1	2	4
Epcom and Ewell ...	—	7	5	—	434	92	11	549	—	—	—	—	—	5	33	38
Esher ... ..	6	6	1	22	528	85	28	676	—	—	—	1	8	15	26	50
Farnham ... ..	8	2	—	2	149	34	26	221	—	—	—	—	—	4	11	15
Frimley and Camberley	6	6	6	28	446	92	14	598	—	—	2	—	—	8	41	51
Godalming ... ..	1	5	3	1	98	19	6	133	—	—	—	—	—	2	9	11
Guildford ... ..	—	—	1	13	107	145	37	303	—	—	—	—	—	3	44	47
Haslemere ... ..	2	1	—	—	74	53	20	150	—	—	—	—	—	2	10	12
Leatherhead ... ..	4	4	1	2	281	125	5	422	—	—	—	—	3	2	27	32
Reigate ... ..	3	7	33	36	356	53	15	503	—	—	—	—	—	7	83	90
Staines ... ..	5	2	5	9	457	86	23	581	—	—	—	—	2	10	69	81
Sunbury ... ..	5	10	10	36	514	56	22	653	—	—	—	—	3	10	137	150
Walton and Weybridge	4	9	2	1	208	118	18	369	—	—	—	—	3	12	44	59
Woking ... ..	—	7	12	21	403	313	36	792	—	—	—	—	—	3	26	29
Bagshot ... ..	—	3	4	6	122	36	7	178	—	—	—	—	—	2	25	27
Dorking and Horley ...	1	5	7	1	209	72	12	307	—	—	—	—	—	5	16	21
Godstone ... ..	6	8	20	27	156	82	9	308	—	—	—	—	—	10	16	26
Guildford ... ..	9	5	1	—	279	269	22	585	—	—	—	—	1	3	32	36
Hambleton ... ..	8	7	1	—	115	125	8	264	—	—	—	—	—	1	18	19
Total ... ..	86	131	131	259	6,060	2,120	355	9,142	—	—	2	1	22	121	741	887

There was one case of generalised vaccinia in a child of 17 months of age.



### Whooping Cough Immunisation.

The following table shows the number of children immunised during the year 1965. In interpreting these figures it should be borne in mind that many children are inoculated with a combined diphtheria-pertussis prophylactic.

District.	Number of children who completed a primary course of inoculation during 1965.							Reinforcing doses.						
	Year of birth.					Others under age 16.	Total.	Year of birth.					Others under age 16.	Total.
	1965.	1964.	1963.	1962.	1958-61			1965.	1964.	1963.	1962.	1958-61		
M.B. and Urban.														
Banstead ... ..	214	196	11	3	1	—	425	—	94	161	41	15	8	319
Caterham and Warlingham...	211	283	13	8	5	—	520	—	11	24	—	6	4	46
Chertsey ... ..	274	402	50	16	15	2	759	—	17	144	41	79	18	299
Dorking ... ..	271	293	21	7	10	2	604	—	53	85	6	61	4	209
Egham ... ..	127	183	16	8	17	—	351	—	5	47	12	61	10	135
Epsom and Ewell ... ..	342	381	18	10	6	—	757	—	196	265	38	76	18	592
Esher ... ..	343	339	30	10	10	1	733	4	37	206	51	115	38	451
Farnham ... ..	185	84	11	2	5	6	293	5	26	57	16	57	25	186
Frimley and Camberley ...	384	568	22	15	11	33	1,033	—	82	156	51	37	45	371
Godalming ... ..	30	72	5	2	1	—	110	—	36	67	11	11	—	125
Guildford ... ..	91	255	204	21	4	—	575	3	24	74	16	55	2	174
Haslemere ... ..	80	94	8	8	6	—	196	—	12	21	4	7	1	45
Leatherhead ... ..	275	406	40	13	5	12	751	—	64	236	52	81	16	449
Reigate ... ..	398	328	24	4	3	—	757	—	186	227	27	128	36	604
Staines ... ..	387	472	74	7	25	4	969	—	154	251	50	155	28	638
Sunbury ... ..	519	400	10	6	4	3	942	—	180	342	42	122	24	710
Walton and Weybridge ...	273	399	25	12	29	8	746	—	118	88	41	185	24	456
Woking ... ..	292	539	111	13	22	30	1,007	—	132	270	65	186	46	699
Rural														
Bagshot ... ..	80	119	10	4	5	—	218	—	6	32	3	36	11	88
Dorking and Horley ...	326	467	123	27	32	10	985	1	80	150	29	45	8	313
Godstone ... ..	229	245	20	12	5	5	516	—	46	92	15	51	38	242
Guildford ... ..	184	361	114	19	14	25	717	—	115	280	58	84	31	568
Hambleton ... ..	73	168	60	13	4	1	319	—	47	104	15	29	9	294
Total ... ..	5,588	7,054	1,020	240	239	142	14,283	13	1,721	3,379	684	1,682	444	7,923
South-Western ... ..	18	41	4	—	—	—	63	—	8	14	—	9	—	31
South-Eastern ... ..	131	129	21	1	2	—	284	—	30	16	6	20	33	105
Total ... ..	5,737	7,224	1,045	241	241	142	14,630	13	1,759	3,409	690	1,711	477	8,059

### 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 all categories for the year are shown below.

Division.	Number skin tested.	Number found positive.	Number found negative.	Number vacci- nated.
North-Western... ..	2,090	121	1,969	1,899
South-Eastern ... ..	1,303	77	1,226	1,221
Northern ... ..	81	7	74	68
South-Western... ..	2,399	91	2,308	2,218
Epsom and Ewell ... ..	724	22	702	701
Esher ... ..	62	4	58	53
Woking ... ..	940	40	900	856
Total ... ..	7,599	362	7,237	7,016

#### 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 18,202 children under 15 years of age completed a primary course of three injections with either single or combined vaccine and 20,213 children in the same age group received a reinforcing dose.

#### Poliomyelitis Vaccination.

The following table shows the number of persons under age 16 completing primary immunisation and receiving reinforcing doses in period 1st January to 31st December, 1965 :—

	Number of Persons.	
	Completed primary course.	Received reinforcing dose.
Children born 1965 ... ..	2,951	14
Children born 1964 ... ..	9,640	212
Children born 1963 ... ..	1,582	343
Children born 1962 ... ..	618	164
Children and Young Persons born 1958-1961 ... ..	1,218	9,759
Others under age 16 ... ..	975	3,167
Total ... ..	16,984	13,659

#### PORT HEALTH UNIT, GATWICK AIRPORT.

The new Unit is now situated at the south end of the Immigration Lounge and consists of a general office, a doctor's office, a vaccination room, a consulting room, two inspection rooms and a staff room.

The main ports served are Europe (chartered and scheduled flights) and charter flights to the Middle East, with two weekly scheduled services to West and East Africa and South America.

Port Health duties are carried out under the Ship and Aircraft Regulations of 1952 and the medical examination of aliens and immigrants under the respective Regulations and Acts are now undertaken.

During the period 1st January to 31st December, 1965, excluding training flights, there were 28,804 aircraft arrivals and departures involving 1,380,001 passengers. During this period, the Unit examined 170 Commonwealth immigrants. Of these, 16 were classified under the Commonwealth Immigrants Act 1962 as likely to require major medical treatment.

604 aliens were examined and of these, 16 were classified as likely to require medical treatment under the Aliens Order 1953.

210 vaccinations were carried out and first aid treatment was given to 398 persons during the year.

The Port Health Staff continued to consist of two Medical Officers with eight part-time General Practitioners operating a duty rota. The number of Clerks/Receptionists was increased from 5 to 5.5 during the latter part of the year in order to deal with the increase in air traffic at the Airport.

#### AMBULANCE SERVICE.

##### Organisation and Administration.

In my last report I gave details of the reorganisation which took place in November, 1964, consequent upon the setting up of a single operational control for the whole County and the reorganisation necessary in preparation for the County boundary changes under the London Government Act.



These changes, including the integration of the Service in 1965 of the services in the Staines and Sunbury area of Middlesex, were carried out smoothly and credit is due to all the personnel concerned for the satisfactory changeover.

### Communications.

The revised methods of communication referred to in my last report are operating successfully. Like other users of the telephone services, however, we are affected by shortages of equipment which are holding up G.P.O. developments and some delays have been experienced with incoming telephone calls. We are assured that these deficiencies will be remedied, and in the meantime emergency services are not affected.

### Operational Strength.

During the year the operational fleet was increased by one ambulance and two sitting case vehicles and at the same time the first steps were taken in increasing the directly operated fleet to compensate for the loss of vehicles operated by the St. John Ambulance Brigade agency service referred to below. At the end of the year the maximum operational strength available was :—

					<i>Ambulances.</i>	<i>Sitting Case Vehicles.</i>
Direct Service	...	...	...	...	53	37
S.J.A.B.	...	...	...	...	5	3
B.R.C.S.	...	...	...	...	2	—
					—	—
Total	...	...	...	...	60	40
					—	—

Because of staff shortages during the year the number of vehicles in operation had to be reduced from time to time.

During the peak period (9 a.m. to 5 p.m. Monday to Friday) each day the Service operated one ambulance per 21,000 of the population approximately and one sitting case vehicle per 33,000 of the population. It is interesting to note the comparable figures for all the urbanised Counties, other than Greater London, i.e., one ambulance and one sitting case vehicle per 17,000 of the population.

### Personnel.

The establishment of operational personnel was increased by 4 Driver/Attendants to man additional vehicles. The full establishment however was never reached during the year and the average under-establishment fluctuated around 10 per cent.

In an effort to overcome staff shortages it was decided to employ female Driver/Attendants, mainly as drivers of sitting case vehicles. They are however trained in full ambulance duties and are expected to undertake these duties when required. In this capacity and also on ambulance control duties female staff have proved their efficiency but the numbers of recruits both male and female coming forward have been disappointing.

### Premises.

During the year the new purpose built station at Epsom was completed and put into service and planning for the new headquarters station at Banstead reached an advanced stage. It was necessary to rent temporary premises at Guildford and Cranleigh pending the construction of new stations there.

### Voluntary Organisations—Agency Services.

During the course of the year the St. John Ambulance Brigade asked the Council to terminate their agency agreement and arrangements were made for the changeover to be completed by April 1966. By the end of the year the services at Caterham, Cranleigh and Guildford had been transferred, together with the paid personnel employed by the S.J.A.B., and new vehicles were being provided.

The British Red Cross Society continue to operate a full agency service at Godalming with paid staff during the day and volunteers at nights and weekends.

### Hospital Car Service.

During the year the Council, at the request of the W.V.S., took over the responsibility for administering the Hospital Car Service. This is now controlled from the headquarters at Banstead with a sub-office at Guildford, instead of from 11 sub-offices manned by part paid or voluntary W.V.S. organisers throughout the County. This full-time control has enabled this important and economical service, provided by voluntary drivers, to be considerably expanded during the year with a consequent reduction in the need for sitting case vehicles in the directly provided service.

I should like to record here my appreciation for the work undertaken by the voluntary drivers and the W.V.S. for so many years.



### Work of the Service.

Ambulance Service responsibilities are not limited to the area of the Administrative County other than the fact that the patient's journey must commence within the County. The bulk of the day-to-day work of the Service is undertaken on behalf of the hospitals and many of the teaching and specialist hospitals are situated in the London area. Over 200 patients a day are moved to and from Greater London.

Because of the change in size of the County resulting from the London Government Act direct comparisons cannot be made, but during the year the number of patients carried per 1,000 of the population increased to 409 compared with 369 in 1964. Emergency calls showed a slight decrease from 13.3 to 12.5 per 1,000 of the population, probably as a result of the transfer to the Greater London Council of the more heavily populated areas. The average time from receipt of call to the arrival at incident during 1965 was 6.3 minutes.

The Service continues to make the maximum use of railway facilities for transferring patients on long journeys and during the year arrangements were made for 174 patients to travel by train in specially arranged facilities over a total of 17,845 miles.

It was not necessary during the year to make use of air transport by helicopter for which services are available. The service did, however, assist other authorities by meeting aircraft particularly at Gatwick Airport. The number of aircraft and passengers using the airport continues to increase. During the year a full emergency turnout to Gatwick was required on 18 occasions and the risks have been enhanced by the increase in size of the aircraft operating which now carry an average of 150 passengers compared with the 50 or 60 capacity when emergency plans for the airport were first introduced.

During the year the Service assisted the London Ambulance Service on 29 full emergencies at London Airport. Transport is provided for maternity flying squads and arrangements exist to transport surgical teams from accident centres to the scenes of major incidents. Accident centres are warned when ambulances are expected to bring in seriously injured or large numbers of casualties.

### Handicapped Persons.

The Service operated three specially designed vehicles on behalf of the County Welfare Committee to transport handicapped persons daily to 23 centres throughout the County. This involved a total of 7,730 patients and 30,900 miles during the year.

### Safe Driving Competition.

On 16th July, 1965, the Chairman of the Council presented awards for safe driving to those successful in the 1964 competition. 351 drivers were entered for the competition organised by the Royal Society for the Prevention of Accidents, 65 were disqualified and 66 were ineligible for awards because of sickness, changes of duty, resignation, etc. 105 drivers with awards had been transferred to the Greater London Ambulance Service. Of the drivers remaining in the new Surrey Area 115 received awards as follows :—

2	15 years brooches.
16	11-14 years oak leaf bars to 10 years medals.
2	10 years medals.
23	6-9 years bars to 5 years medals.
2	5 years medals.
70	Diplomas 1-4 years.

### Training.

During the year thirteen two weeks courses were held at the Training School when 88 ambulance personnel attended.

These courses were mainly held for new recruits to the Service and covered a syllabus designed to introduce them to the correct method of dealing with patients and the general public, driving and first aid.

Because of the difficulties experienced in recruitment the average number attending each session was fewer than during previous years and the standard of recruits was lower, mainly in driving ability. This required additional periods for driving tuition, so making extra demands on the time of officers on giving this type of instruction.

An increasing demand was made on the service of the Training Officer to give instruction to other organisations such as Women's Institutes, District Nurses, Schools and industrial undertakings.

### Annual Competition.

This annual event took place at Sandown Park Racecourse on the 23rd June, 1965. Four teams competed in the final; the Banstead team won the event, and went on to represent Surrey at the Regional Final in Battersea Park, London. Eight drivers also competed in a driving competition on sitting-case vehicles.



### County Show, Guildford.

The Ambulance Service presented a set piece in the Surrey County Marquee. Accidents happening during the Whit Monday anywhere in the County were plotted on the map of the County as they occurred and the general public were able to hear on the radio set vehicles going to the accident and reporting to the Control when the accident had been attended to.

A teleprinter was also installed and messages came through this to the ground from the Control at Banstead.

Officers of the Service attended to answer questions on the service from the public.

### Civil Defence.

The organisation and training of the Ambulance and First Aid Section of Civil Defence is the Ambulance Service's responsibility.

Instruction to volunteers continued and during the year 1,609 classes were held, good progress being made in this training.

On completion of their initial or standard training volunteers are invited to take a test and if successful are qualified to receive a bounty. In these tests 448 volunteers passed and 87 failed. This pass mark is the highest in the South Eastern Region.

During the year the introduction of advance tests commenced. These are designed to test the ability of volunteers to demonstrate their skill and give reasons for their actions in certain circumstances. The results of these tests were good. Seven Convoy and Deployment Exercises were held during the summer months in which 373 volunteers took part. The majority of these exercises were designed to give the volunteer officers appointed an opportunity to put their training into effect. Peacetime officers acted as advisers or directing staff.

The section took part in County and County District exercises of various types and a weekend regional exercise.

The strength of the section is now 363 recruits, 426 Class "A," 44 Class "B," 656 Reserved, a total of 1,489.

There are 22 training ambulances and 3 dual purpose vehicles available for training in the County on loan from the Ministry of Health. Fifty instructors are qualified to instruct volunteers, having obtained an Instructor's Certificate at either a Home Office Central School or at a locally held course.

### Training in Nursing Regulations, 1963 (Home Nursing and First Aid).

Eleven courses were held at County Hall for training staff in Home Nursing and First Aid attended by 139 members of the staff. Courses were arranged for other organisations and 207 attended.

The responsibility for training the staffs of County Districts and the general public were delegated to County Districts and the necessary equipment purchased and distributed as required.

#### WORK DONE BY THE UNIFIED AMBULANCE SERVICE DURING 1965.

EMERGENCY.							MATERNITY.	
Accident.		Illness.		False Alarms.	Totals.		Totals.	
Patients.	Miles.	Patients.	Miles.	Miles.	Patients.	Miles.	Patients.	Miles.
9,560	77,792	2,538	22,480	10,754	12,098	111,026	3,017	39,387

GENERAL.									
Hospital.		Out-Patient.		Infectious Diseases.		Private.		Non-Patient (Misc. Mileage).	Abortive Miles (G.F.).
Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Miles.	Miles.
43,333	575,772	336,899	2,453,910	436	8,637	242	3,781	53,595	22,692

TOTALS.							
Emergency.		Maternity.		General.		Grand Totals.	
Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.
12,098	111,026	3,017	39,387	380,910	3,118,387	396,025	3,268,800



DIVISION OF WORK BETWEEN THE COUNTY'S DIRECT SERVICE AND VOLUNTARY ORGANISATIONS DURING 1965.

County Service.		VOLUNTARY ORGANISATIONS.				Hospital Car Service.	
		S.J.A.B.		B.R.C.S.			
Patients.	Miles.	Patients.	Miles.	Patients.	Miles.	Patients.	Miles.
224,014	1,617,848	56,083	435,831	6,225	64,664	109,703	1,150,457
GRAND TOTALS.							
		Patients.		Miles.			
		396,025		3,268,800			

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 Hospital Boards for the South West Metropolitan and North West Metropolitan areas. The Council are responsible for prevention, care and after-care, the Hospital Boards for diagnosis and treatment. Close liaison is maintained between officers of the Council and the Hospital Boards and many of the medical staff are jointly appointed.

**CHEST CLINIC ORGANISATION.**

Tuberculosis visiting throughout the County is undertaken by 25 health visitors (of whom 11 devote full time to the tuberculosis service) and 1 part time tuberculosis visitor. The remainder are general health visitors who undertake the tuberculosis visiting in certain rural areas of the County. During 1965 these health visitors paid a total of 5,916 visits to tuberculous households and attended 1,397 chest clinic sessions.

**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 examination and supervision of contacts and B.C.G. vaccination.

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

*B.C.G. Vaccination.*

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

During 1965 the Chest Physicians carried out about 700 contact vaccinations. The areas of some of the Chest Physicians are partly within and partly outside the County and it has not always been possible accurately to subdivide the vaccinations according to whether the patients are or are not now Surrey residents. This figure does 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 (see Vaccination and Immunisation, page 40.)

**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 break-up of families (reported on page 20), in so far as the same team of social workers covered both sets of duties. 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. The Care Organiser and the Deputy Care Organiser continued to spend half 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 185.



### *Care Committees for Tuberculosis and Chest Diseases.*

The thirteen 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 £4,331 by their own efforts, and received £1,075 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 £4,419 covered a wide range of items to meet individual needs, but the main items were food (£1,472), clothing, bedding and household items (£770), rehabilitation (£266), holidays (£988) and fares, outings and Christmas gifts (£593).

The Standing Conference of Surrey Care Committees for Tuberculosis and Chest Diseases, which co-ordinates the work of the district Care Committees and which consists of representatives of the Care Committees and the County Health Committee, had an income of £1,592 during the year which included a grant of £250 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 (£40), loans and grants where substantial amounts are required for resettlement after treatment (£147), and summer holidays for families at the country and seaside (£1,189).

The beach chalets which were hired by the Conference provided a fortnight's holiday each for some 19 families comprising approximately 34 adults and 41 children who were selected by the chest physicians. The County Education Committee again granted the use of Sheepchatch School for a fortnight's holiday for 100 child "contacts" and contributed 25 per cent of the cost.

As from the 1st April, 1965, the County Council took over from the Conference the responsibility for 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 on 31st December, 1965, consisted of 1 Head Occupational Therapist and an Assistant Head Occupational Therapist, 6 assistant Occupational Therapists, 1 Senior Technical Instructor, 5 Technical Instructors, 2 Carpenters, 1 Handyman, 1 Supplies and Marketing Officer, 2 Clerk/Storekeepers. Students have attended for their practical experience during the year.

#### *Organisation.*

In addition to home visiting, occupational therapy is provided at 11 classes in different parts of the County, namely at Esher, Camberley, Guildford, Ewell, Leatherhead, Ottershaw, Woking, Walton-on-Thames, Dorking, Redhill and Warmingham. The last four were started during the year, and in the majority of classes the numbers have increased.

Art instruction is given at Ewell on alternate Tuesday afternoons together with limited home visiting. The Standing Conference of Surrey Care Committees for Tuberculosis and Chest Diseases meets the expenses for travelling and general materials. This service has been in operation for several years and is proving most valuable.

There has been a further growth in the number of aids constructed and fixed by Technical Instructors with continued development in the use of mechanical lifting devices of various kinds. The number of persons assessed and for whom aids were recommended was 684 representing a total of 1,679 aids.

The volume of remunerative occupations has increased, particularly noteworthy are the aspects relating to Printing and Chair Seating. Several Handicapped persons are engaged in producing aids such as bath seats, boards, fracture boards, dressing and eating aids, etc.

Exhibitions and Sales were held throughout the year, the mobile shop still proving a most valuable means for the disposal of goods. The scheme introduced last year for buying in of completed articles is now firmly established and very worth while.

Horticultural Shows and firms were visited throughout the year. There has been the greatest support and co-operation.

The work of the Unit was demonstrated as part of the County Council's exhibition at the County Show. The mobile shop was also present on the ground, the sales result being highly satisfactory.

"Help the Disabled Week." In conjunction with the Voluntary Association for Surrey Disabled and by kind permission of A. J. Baker & Co. Ltd., Dorking, a display in their showroom was held covering a wide range of aids. The exhibition was staffed throughout the week for advice and demonstration purposes. There was an excellent attendance of professional workers and the general public.

The Voluntary Association for Surrey Disabled has given considerable help and advice, particularly in the development and organisation of classes.

The amount expended on materials was £5,166 11s. 9d. as compared with £6,162 5s. 8d. in 1964.

During the year, 24 chest patients and 210 other handicapped persons were registered for Occupational Therapy. The standard of work remains high and the overall development satisfactory.



During the year premises in Fetcham were acquired to serve as Headquarters for the Unit and replacing 104, Westbury Road, New Malden. Occupation is anticipated early in 1966.

The table below shows the number of persons receiving Occupational Therapy on 31st December, 1965.

Category.	Domiciliary.	Classes.	Postal.	Total.
Chest ... ..	54	Nil	18	72
Other handicapped ... ..	167	166	36	369
Total ... ..	221	166	54	441

### 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 is now much larger than the Administrative County of Surrey, including as it does the London Boroughs of Croydon, Kingston, Merton, Richmond and Sutton and parts of North Sussex and North East Hampshire. It does not cover the Urban Districts of Sunbury and Staines which came within the area of the North West Metropolitan Regional Hospital Board. The statistics quoted below relate to the whole area covered by the Units.

In 1965 the Surrey Mass Radiography Service X-rayed 135,924 persons. These examinations were carried out by two separate services as follows:—

General Practitioner Chest X-Ray Service ... ..	15,221
Normal Mass Radiography Service ... ..	120,703

The Medical Director points out that there was a sharp fall in the number of cases of significant pulmonary tuberculosis in 1965. The decrease affected the incidence rates per 1,000 examinations which, under both the General Practitioner Service and Normal Mass Radiography, have declined, although the former rate is still nearly three times the rate found by normal mass radiography.

The number of cases of primary cancer of the lung continues to increase. There is evidence to suggest that routine six-monthly chest X-ray examinations of men over 45 years of age may enable lung cancer to be found at an earlier stage, with improvement in the prognosis. Other patients in whom routine chest X-ray examination is indicated include diabetics, post-gastrectomy subjects, those on steroid treatment and persons who smoke twenty or more cigarettes daily.

### 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 ...	7,972	7,249	15,221	27	3.4	11	1.5	38	2.5

### Normal Mass Radiography Service.

General Public ... ..	21,035	28,869	49,904	27	1.3	19	0.7	46	0.9
Industrial Groups ... ..	40,875	21,845	62,720	29	0.7	7	0.3	36	0.6
School Children ... ..	610	20	630	—	—	—	—	—	—
Mental Hospitals and Institutions	2,100	1,821	3,921	5	2.4	2	1.1	7	1.8
Contacts at work... ..	682	510	1,192	4	6.0	2	3.9	6	5.0
Referred by Medical Officers of Health ... ..	796	1,540	2,336	4	5.0	—	—	4	1.7
Totals ... ..	66,098	54,605	120,703	69	1.0	30	0.5	99	0.8



	General Practitioner Chest X-ray Service.			Normal Mass Radiography Service.		
	1963	1964	1965	1963	1964	1965
Total number X-rayed ... ..	13,353	14,482	15,221	123,180	116,649	120,703
Significant Pulmonary Tuberculosis* ...	51	51	38	130	127	99
Primary Lung Cancer in men aged 45 and over ... ..	62	84	66	51	42	59
Incidence rate per 1,000 examinations ...	18.2	23.4	16.8	2.3	1.9	2.5
Primary Lung Cancer in women aged 45 and over ... ..	11	8	16	7	13	14
Incidence rate per 1,000 examinations ...	4.3	2.9	5.1	0.4	0.8	0.7

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

#### *Abnormal Findings.—*

	General Practitioner Chest X-ray Service.			Normal Mass Radiography Service.		
	Male.	Female.	Total.	Male.	Female.	Total.
Pulmonary Tuberculosis ... ..	45	31	76	120	53	173
Non-Tuberculous conditions ... ..	628	397	1,025	383	225	608

#### **Rehabilitation and Colonisation.**

During 1965 the Council were liable for the maintenance of 1 tuberculous patient at Papworth.

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

#### **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. The scheme is intended to provide for patients who require a short period of recuperation to complete their recovery following either in-patient or out-patient treatment in hospital and also including 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 £3 4s. 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, 1965, 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	49	49	127	225
Cost (before deduction of contributions by patients) ... ..	£566	£604	£1,512	£2,682
Lengths of stay: 1 week ... ..	6	3	8	17
2 weeks ... ..	42	44	110	196
3 weeks ... ..	1	2	7	10
4 weeks ... ..	—	—	2	2
over 4 weeks ... ..	—	—	—	—

#### **Night Attendance Scheme.**

The Council, as in previous years, continued to guarantee any loans, 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 £50 per annum by the Borough of Reigate Old People's Welfare Committee and 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.



No cases were admitted to nursing homes during the year under a scheme approved by the Council as an 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 42.

The extent of the loans of nursing equipment during the year ended 31st December, 1965, was as follows :—

<i>Article.</i>	<i>No. of Loans.</i>	<i>Article.</i>	<i>No. of Loans</i>
Air beds ... ..	16	Bed cradles ... ..	421
„ bellows ... ..	1	Crutches ... ..	141
„ rings ... ..	528	Douche cans... ..	18
Bed rests ... ..	556	Feeding cups ... ..	121
„ pans ... ..	852	Inhalers ... ..	11
„ tables ... ..	92	Mackintosh sheets ... ..	725
Invalid chairs ... ..	782	Steam kettles ... ..	5
Commodore ... ..	815	Urinals ... ..	367

#### 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 articles 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 and Redhill situated in the Administrative County of Surrey were continued during the year by the respective Hospital Management Committees. The clinic at Carshalton also continued but as a result of the London Government Act, 1963, this clinic is now within the London Borough of Sutton. The duty of persuading women defaulters to resume attendance and of securing the attendance of persons exposed to infection continues to be exercised by the Council's Special Services Visitor.

In addition to the details of Surrey residents having been treated at Guildford, Woking and Redhill clinics which is obtained from the annual return which is made by the Medical Officer of the Clinic to the Ministry of Health, details have also been obtained from the Carshalton and Croydon clinics and clinics at surrounding hospitals relating to the number of Surrey residents treated at these clinics. The following summarises the information received :—

1965.	Guildford. Clinic.	Redhill Clinic.	Woking Clinic.	Other Clinics.	Total.
<b>New Cases (Surrey).</b>					
Syphilis ... ..	2	—	1	34	37
Gonorrhoea ... ..	56	6	13	254	329
Other conditions ... ..	298	43	51	1,500	1,892
Totals ... ..	356	49	65	1,788	2,258

### Health Education.

The main drive in health education this year has been directed towards the schools, youth organisations and colleges of further education. A full account of these activities is given later in the Report. Supporting and complementing the work of the teachers, however, the medical, dental, nursing and other staff have been assisted by means of in-service and refresher programmes, or by the provision of teaching aids and materials to make the educational work more effective. Moreover, the staff have included the many varied community groups within their range of interest. These have included the British Red Cross Society, Young Wives, church groups and fellowships, women's coffee clubs, townswomen's guilds, Inner Wheel, Rotary, Samaritans, St. John Ambulance Association, Scout, Guide and other uniformed organisations and a number of independent schools and colleges.



In addition to the health education activities directed to these voluntary bodies, special mention must be made of the day-to-day advice and guidance which provides the basis of preventive medicine in the clinics and welfare centres. Regular ante-natal preparation classes are held at most clinics continuously throughout the year. The health visitors are mainly responsible for this work, but midwives and physiotherapists have been taking an increasing part. It is in the ante-natal period and in the few years following the birth of a child that parents most need knowledge of child care and are most willing to be taught. In recent years, parents have shown a better appreciation of the need for knowledge and greater willingness to be taught: consequently it has been possible to make wider use of experts and the various mass media of communication. In particular, the father now plays a larger part in caring for babies. In many areas, therefore, teaching is widened to include both parents. Effective parenthood demands a willingness to learn, think and attack problems and situations with knowledge and discrimination. Knowledge of emotional growth and development, essential to the establishment of satisfactory family relationships, requires education. This work, which is a natural extension of that given in many schools, requires not only knowledge and enthusiasm, but the ability to teach different people in different situations and to accept the disciplines of team work as well as its benefits.

In addition to staff training programmes, therefore, a considerable increase in the quantity and variety of teaching aids has been effected. Additional film, filmstrip and slide projectors, audio aids and accessories have been acquired for the use of staff, as well as further supplies of filmstrips, teaching charts, publications and other educational aids in a variety of subjects. The projection service, initiated last year, was extended to the full, reaching audiences totalling nearly 5,000. A number of activated displays was constructed for use in connection with certain health topics, and facilities for photography were acquired to provide a basis for displays. During the year filmstrips illustrating two County Health Services were prepared dealing with Aids for the Handicapped and the Dental Services. These are used for staff training purposes and to illustrate lectures given to community groups.

A significant increase occurred in the number and scope of public displays and exhibitions on health topics, notably smoking and health, prevention of accidents, health publications and health services. Assistance was given to medical officers of health in the promotion of health exhibitions especially on home safety. Preparations were put in hand for a series of exhibitions on the use and misuse of drugs and medicines.

The campaign on Smoking and Health was continued in the maintained and independent schools, and the topic received appropriate attention by the medical lecturers at the many conferences of Heads of Primary Schools which were organised throughout the year. In addition many of the lectures to outside organisations and groups of the community dealt with the harmful effects of smoking, full use being made of the increased supply of film material on this topic as well as the greatly improved mass media.

As in previous years the basis of the educational approach to venereal disease has been the continuation of a policy of general education in personal relationships, fortified, as occasion demanded, by special talks to selected groups. The appointment of an assistant health education officer who, in addition to nursing and health visitor qualifications, had considerable experience in social work in the field of venereal diseases, enabled skilled educational assistance to be available on this subject as well as in the wider field of health education. During the year it was possible to broaden the basis of publicity for special clinics by securing the display of posters in public libraries and certain youth centres. In addition permission was secured to display the address of the nearest special clinics in the main post offices throughout the County. The confidential advice given through the central office was continued as usual.

During the year a few divisional appointments on senior health visitor grade were made whose duties included part-time promotion of health education in their area. At the same time a Health Education Group was formed to meet centrally to discuss the co-ordination of the work throughout the County, and to receive up-to-date information on methods and media.

Educational support was provided for courses for social work students, mental health training centre staff, district nurses and others in addition to a number of courses run by voluntary organisations. Extended attachments to the department involved a professor of paediatrics from Korea, an instructor in paediatrics from Iran (UNICEF Fellowships), a post-graduate medical student undertaking the D.P.H. course, and representatives of the governments of Ceylon and Pakistan. The Trainee General Practitioner Scheme of the British Medical Association was extended to provide for two periods of attachment involving some sixteen doctors. A number of general practitioners have also accepted the invitation to attend these discussions on the local authority health services.

### Chiropody.

The Council's chiropody scheme which is limited to the elderly, physically handicapped and expectant mothers is administered directly by the Council through the divisionalised service which caters for these groups 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.

In view of the increased number of applications from private and voluntary homes for the aged and increasing demand for domiciliary treatments, a pilot scheme to cover such treatments was



commenced in one division of the County on 1st January, 1965 by means of the employment of a full-time chiropodist on the Council's staff. This was extended throughout the County during the course of the year, a further three full-time chiropodists being appointed. A few sessions were also arranged at clinics under the direct scheme in conjunction with the geriatric clinics operating in the County.

The number of chiropody treatments given by private chiropodists, is not restricted during the first three months of treatment, but after three months has elapsed, the number of these given to each patient should not exceed six per annum except with the Divisional Medical Officer's authority. The Chief Chiropodist continues to devote the major proportion of his time to supervising the service in the field, and is available to advise on any cases where there is doubt about the number of treatments necessary and vetting requests from voluntary bodies for additional sessions to be held.

The majority of treatments given under the indirect scheme were held at clinic sessions and where certain of the treatments were held at chiropodists' surgeries or by domiciliary treatments, these, wherever possible, were brought under the control of the Council's direct chiropody scheme. During the year 54 extra chiropody sessions per annum were approved at indirect chiropody clinics.

The chiropody treatment which is given under the direct and indirect chiropody service continued to cost the patient 3s. 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 31st December, 1965 grants totalling £5,838 were paid to voluntary bodies providing chiropody services and the cost of the direct service provided by private chiropodists for the elderly, handicapped persons, the blind and partially sighted and expectant mothers, amounted to £11,705 (after deducting contributions received from patients in each case). In addition to these costs in operating the scheme, the salaries, travelling expenses, running costs, equipment, etc., of the Council's employed full-time chiropodists, must be added.

Particulars of the persons treated and the number and types of treatments given under the chiropody scheme are shown below :—

#### Indirect Service—

Number of elderly persons treated ...	...	...	...	...	...	4,887
Number of treatments given ...	...	...	...	...	...	20,025
(Includes 511 treatments given by County Council Chiropodists.)						

#### Direct Service—

Number of expectant mothers treated ...	...	...	...	...	...	25
Number of handicapped persons treated ...	...	...	...	...	...	146
Number of registered blind or partially sighted treated ...	...	...	...	...	...	99
Number of elderly persons treated ...	...	...	...	...	...	6,550
Number of school children treated ...	...	...	...	...	...	27†
Total number of treatments given by private chiropodists ...	...	...	...	...	...	29,674
Total number of treatments given by County Council chiropodists ...	...	...	...	...	...	4,945

Total number of treatments under direct service ...	...	...	...	...	...	34,619
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† Staines and Sunbury area only under Ex-Middlesex scheme.

## HOME HELPS.

### Administration of the Scheme.

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

### Establishment.

The establishment of equivalent full-time helps for the financial year ended the 31st March, 1966 was 289. The average number of equivalent full-time helps employed weekly throughout the calendar year was 244.8.

### Supervision.

During the year the Divisional Supervisors paid 5,244 first visits, 8,660 revisits and 4,320 miscellaneous visits, a total of 18,224.



### The Scope of the Scheme.

The total number of cases helped during 1965 was 5,531.

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 1965.	Hours of service given during 1965.	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 ... ..	1,347 (24.4%)	52,624 (12.0%)	31	15.3	2.0	57 (3.5%)
Acute ... ..	704 (12.7%)	27,016 (6.1%)	38	7.1	5.3	71 (4.4%)
Chronic ... ..	3,459 (62.6%)	355,188 (81.2%)	102	4.4	23.2	1,555 (91.3%)
Tuberculosis ...	21 (0.3%)	2,548 (0.7%)	121	4.9	24.9	10 (0.8%)
County 1965 ...	5,531 (100%)	437,376 (100%)	79	4.4	18.0	1,693 (100%)

The table on page 53 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 54 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 the year assistance was provided to 75 elderly persons in their homes in Whiteley Village who could not afford to pay the full cost of the service.

In all 6,213 hours were so provided.

### Neighbourly Help Scheme.

This scheme continues to form a most valuable supplement to the home help service. During 1965, 243 cases received the services of a neighbourly help at a total cost of £8,784 for the year which is equivalent to 17.4 whole-time helps each week.

### Special Payments.

The County Council continued to make special payment 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, at the discretion of the Divisional Medical Officer.

During 1965, 13 cases of category (a) and 21 in category (b) were dealt with.

During the year the Council undertook a comprehensive review of the home help service to explore methods of improving recruitment and retaining staff, and resolved to:—

- (a) make representations to the National Joint Council for Manual Workers to pay improved rates of pay for Surrey home helps.

As a result of these representations the County Council were authorised to pay an excess rate of threepence per hour over the National rates of pay, and agreed to apply the extra threepence per hour generally over all the County.

- (b) to organise a pilot scheme for training home helps.

The pilot scheme proved a success, and the Council have since decided that similar schemes should be held throughout the County.

- (c) make provision in estimates for publicity campaigns throughout the County.

- (d) increase special payments to home helps.

“Dirty Money.”

Initial payment ... .. from 10s. to £1 per case.

Continuing payment ... .. „ 4d. per hour to 6d. per hour.

“Problem Families” ... .. „ 4d. per hour to 6d. per hour.

- (e) increase the maximum payment for neighbourly help from £2 to £3 5s.

Division or District.	Population mid-1965.	Average.	Average equivalent F/T Helps employed weekly during 1965.	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.												
Northern ...	91,870	13,880	33.1	139	94	367	1	601	81.3	4.3	6.3	8.1
North-Western...	191,363	68,881	45.5	228	99	473	1	801	82.4	5.8	4.7	6.8
South-Eastern ...	235,735	148,454	65.4	357	216	1,255	4	1,832	85.0	5.3	3.5	6.2
South-Western...	238,332	145,679	54.5	244	169	676	6	1,095	84.6	4.9	3.7	6.8
DISTRICTS WITH DELEGATED HEALTH FUNCTIONS.												
Epsom M.B. ...	71,980	8,427	14.25	151	50	305	3	509	81.2	7.0	3.5	8.3
Esher U.D.C. ...	62,470	14,850	7.6	79	25	140	2	246	82.9	7.9	2.6	6.6
Woking U.D.C. ...	76,020	15,708	24.5	149	51	243	4	447	83.8	3.6	6.1	6.5
County ...	967,770	415,879	244.8	1,347 24.4%	704 12.7%	3,459 62.6%	21 0.3%	5,531 100%	83.8	4.9	4.3	7.0



Division or District.	Average weekly number of cases helped.						Average service per case.										
	Maternity.	Acute.	Chronic.	T.B.	Total.	Per equivalent F/T Home Help employed.	Per 10,000 population.	Maternity.		Acute.		Chronic.		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.	Hours per week.	Duration in weeks.
DIVISIONS.																	
Northern ... ..	7	18	207	1	233	7.0	25.9	13.1	2.2	7.2	9.1	4.4	29.0	3.0	52.0	4.9	18.4
North-Western ... ..	10	10	284	1	315	6.6	16.6	13.7	2.3	8.2	5.2	5.0	28.8	4.5	52.0	5.8	17.4
South-Eastern ... ..	13	14	409	2	438	6.7	19.3	20.0	1.9	8.0	3.3	4.7	17.4	4.5	26.0	5.3	12.2
South-Western ... ..	11	16	332	2	361	6.6	15.3	20.6	2.3	7.0	4.8	4.6	25.7	6.0	18.3	5.3	17.3
DISTRICTS WITH DELEGATED HEALTH FUNCTIONS.																	
Epsom M.B....	6	3	141	1	151	10.6	21.5	17.3	2.1	3.8	3.2	2.9	24.1	2.0	8.0	3.5	15.1
Esher U.D.C. ... ..	2	4	58	1	65	8.5	10.8	23.5	1.3	3.0	8.6	4.8	14.8	4.3	9.0	4.1	13.4
Woking U.D.C. ... ..	8	6	114	2	130	5.3	18.5	15.9	1.7	11.2	6.2	5.7	24.7	9.2	36.1	6.5	15.2
County ... ..	57 3.5%	71 4.4%	1,555 91.3%	10 0.8%	1,693 100%	6.8	17.6	15.3	2.0	7.1	5.3	4.4	23.2	4.9	24.9	4.4	18.0

## MENTAL HEALTH SECTION.

### Building Programme.

During the first three months of the year, the new 93-place purpose-built Kingston Training Centre was opened, as was the new Special Care Unit at the Morden Training Centre. A new Junior Training Centre was opened at the premises of the old Sutton Adult Training Centre which had been closed in September, 1964.

All these premises were transferred to the London Boroughs in which they are situated on 1st April, 1965. The Wallington Hostel for Mentally Ill patients was almost completed when the premises were transferred to the London Borough of Sutton.

The operation of the London Government Act has also meant that it was necessary to undertake a complete review of the Development Programme in order to cater for the needs of the new Surrey, and at the time this review was taking place a Government circular was received directing that all major projects involving capital expenditure must be delayed for six months. Consequently, no further building was commenced during 1965 but much preparatory work for schemes included in the capital building programme for 1965-66 and 1966-67 was carried out both in the Health and the Architects' Departments.

Unfortunately the implementation of the Development Plan continues to be delayed by planning and other difficulties of a legal and technical nature. In particular, it has not been possible to begin work on the adaptation of the premises in York Road, Cheam, as a Hostel for Mentally Ill Females.

### Residential Care.

Demands for residential care continue to increase, and at the end of the year there were 113 cases for whom the County Council accepted responsibility.

So far the County Council has only one hostel, Sendhurst Grange, which provides places for 30 subnormal children. This hostel has continued to be handicapped by severe staffing difficulties and, in particular, by the fact that for the first eleven months of the year there was no deputy matron.

The various difficulties already referred to continued to delay the building of further hostels, but it is hoped to start on the building of the West Molesey Hostel for subnormal females in the early part of 1966.

Meanwhile, the County Council has had to give up to London Boroughs certain of their beds in hostels run by County aided voluntary organisations and at the end of the year the position in regard to such beds was as follows :—

<i>Home.</i>	<i>Organisation.</i>	<i>No. and type of Patient.</i>	<i>County Beds.</i>
Woodbury, Surbiton	Women's Voluntary Services	18 confused elderly	6
Gaywood, Wimbledon	Cheshire Foundation	18 ex-mentally ill	4
Miraflores, Wimbledon	Cheshire Foundation	15 ex-mentally ill	
Lourdes House, Wallington	Society of St. Bernadette	10-11 subnormal children	
26, The Drive, Coulsdon	Society of St. Bernadette	6 subnormal children	4
Croft House, East Molesey	Richmond Fellowship	13 male and female adults—ex-mentally ill	6

### Mental Nursing Homes.

The three Mental Nursing Homes listed below have been registered by the County Council in accordance with Section 15 of the Mental Health Act, 1959. Apart from the transfer of two mental nursing homes to the London Boroughs in whose areas they are situated, there were no additions or cancellations during 1965, and the three homes were visited regularly by the County Council's authorised officers during the year :—

<i>Home.</i>	<i>Organisation or Owner.</i>	<i>Number and Category of Patients.</i>
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 7 years of age.
Tyrwhitt House, Oaklawn Road, Leatherhead	Ex-Services Mental Welfare Society	27 mentally ill adults.

### Homes for the Mentally Disordered.

When the London Government Act came into operation, five of the ten Homes for the Mentally Disordered which had been registered by the County Council under Section 19 of the Mental Health Act, 1959, passed into the control of the London Boroughs. No new homes were registered during the year and the following is a list of the Homes registered at the end of the year :—



<i>Home.</i>	<i>Organisation or Owner.</i>	<i>Number and Category of Patients.</i>
The Hill House, Portsmouth Road, Esher	Mental After Care Association	30 male and 5 female ex-mentally ill.
Milner House, Ermyn Way, Leatherhead	Ex-Services Mental Welfare Society	29 male adults ex-mentally ill.
Kingswood Grange, Kingswood	Ex-Services Mental Welfare Society	20 male adults ex-mentally ill.
Croft House, East Molesey	Richmond Fellowship	13 male and female adults ex-mentally ill.
The Meadows, Betchworth	Miss Rhoades	10 female adults subnormal.

#### **Social Clubs and Day Centres.**

Of the six clubs that had been established in the County at the beginning of the year, three were transferred to London Boroughs. During the year, however, two new clubs for the mentally ill were opened at Farnham and Egham and a creche for mentally subnormal children was started in Woking. The Egham club is run entirely by the social workers based at the Chertsey Mental Health Area Office and so far, no voluntary organisation is involved. The premises are rented from the Egham Urban District Council.

The following are the clubs and day centres which are either run entirely by the County Council's officers or to which the County Council contributes towards the running costs:—

<i>Club or Centre.</i>	<i>Organisation.</i>	<i>Type of Patient.</i>
Handshake Club, 44, Waterloo Road, Epsom	Epsom League of Friends for Mental Health	Ex-mentally ill and subnormal.
Fortyfoot Road, Leatherhead	Epsom and Leatherhead District Society for Mentally Handicapped Children	Subnormal and severely subnormal children and adults.
The Friendship Centre, London Road, Redhill	Reigate and District Association for Mental Health	Ex-mentally ill persons.
The Social Centre, Board School Road, Woking	Woking and District Society for Mentally Handicapped Children	Subnormal and severely subnormal children.
W.V.S. Centre, East Street, Farnham	Women's Voluntary Services	Ex-mentally ill persons.
Egham Hythe Social Centre, Egham	Surrey County Council	Ex-mentally ill persons.

#### **Training Centres.**

The operation of the London Government Act resulted in three of the County Council's training centres being transferred to London Boroughs, leaving five within the county. In Staines and Sunbury which became part of new Surrey, there is no training centre and 71 children and trainees from these areas are, therefore, continuing to attend at the centres set up by the Middlesex County Council, which are now administered by the Borough Councils of Hounslow and Hillingdon.

On the other hand, 30 children and trainees from Purley, which is now part of the Borough of Croydon, continue to attend the Caterham Training Centre, and 30 Sutton trainees and 40 Merton trainees are still attending the Banstead Adult Training Centre. In each case the sending authorities accept financial responsibility.

No new centres were opened in the county during the year but, as mentioned above, the prospects for the future are more promising. In addition to the permanent centres, on which building is likely to start in 1966, a temporary centre will be opened at Farnham early in 1966, and a temporary adult training centre is likely to open at Chertsey during the year.

The transporting of the trainees to and from the training centres daily is becoming a serious problem. The finding of suitable firms willing to undertake the transport contracts and the recruiting of suitable persons to act as guides on the coaches is becoming increasingly difficult. The possibility of the Ambulance Service taking over the transport of the trainees is being investigated and it is hoped to operate a trial scheme for one of the centres by the early part of 1967.

#### **Holiday Homes for Mentally Handicapped Children and Adults.**

As in previous years, arrangements were made for groups of children and trainees from training centres to spend holidays at camps during the summer. 60 senior girls went to the National Association for Mental Health Holiday Home at Bognor Regis from 1st until 15th July; 47 senior boys attended the National Society for Mentally Handicapped Children's Home at Pirates Spring, Dymchurch, from 26th June until 10th July; and 48 children went to Pirates Spring from 22nd May until 5th June.

In addition, a total of 14 children and trainees from Staines and Sunbury attended holiday camps at St. Mary's Bay, Dymchurch, and at Park Place School, Henley-on-Thames, under arrangements made by the Hounslow and Hillingdon Borough Councils.

### Training of Staff.

The development of all branches of the mental health service continues to be hampered by severe shortages of suitably trained staff.

However, three of the four posts of trainee mental welfare officer were filled during the latter half of the year and two of the younger mental welfare officers have been accepted for courses of study for the Certificate in Social Work which will commence in September, 1966.

The in-service training of assistant housemothers at Sendhurst Grange Hostel is proceeding satisfactorily and there is no shortage of young girls applying for posts as trainee assistant housemothers. Unfortunately, however, some leave before completing their training.

Of the training centres staff, two of the six trainee assistant supervisors are undergoing training for the N.A.M.H. Diploma for Teachers of the Mentally Handicapped, and another has already been accepted for a two-year course starting in September, 1966.

### Approval of Medical Practitioners.

Altogether, eight medical practitioners were approved for the first time during the year for the purpose of Section 28 of the Mental Health Act, 1959, compared with 13 during 1964, and the original approvals of 47 others which had expired were renewed for a further period of five years. Eight of these renewals related to doctors originally approved by other authorities.

At the end of the year, a total of 102 doctors had been approved by the County Council and of these, 21 will be dealt with by other authorities (i.e. by London Boroughs) when their approvals fall due for renewal.



Number of Patients referred to Local Health Authority during year ended 31st December, 1965.

Referred by.	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)	
(a) General practitioners ... ..	1	2	191	455	—	—	1	4	—	2	1	—	2	1	—	3	5	193	460	661	
(b) Hospitals, on discharge from in-patient treatment ... ..	—	—	115	284	—	—	2	1	—	—	2	—	—	—	—	—	—	119	285	404	
(c) Hospitals, after or during out-patient or day treatment ... ..	—	1	44	99	—	—	2	1	9	1	1	1	4	7	—	13	9	47	101	170	
(d) Local education authorities... ..	—	1	—	8	—	—	—	8	5	10	19	5	6	4	—	13	12	14	27	66	
(e) Police and courts ... ..	—	—	49	22	—	—	2	—	—	1	1	—	—	—	—	—	1	52	22	75	
(f) Other sources ... ..	1	2	107	176	—	—	2	—	20	12	39	39	31	27	22	16	52	41	170	231	
(g) Total ... ..	2	6	506	1,044	—	—	9	6	37	21	54	59	42	41	26	17	81	68	595	1,126	
																				1,870	

*Number of Patients under Local Health Authority care at 31.12.65.*

	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)	
(a) Total number...	1	234	578	—	—	3	3	68	71	233	235	146	118	141	117	214	190	611	933	1,948	
(b) (i) Attending day training centre...	—	—	—	—	—	—	—	38	34	33	44	95	59	71	57	133	93	104	101	431	
(ii) Awaiting entry thereto	—	—	—	—	—	—	—	12	9	1	7	21	17	3	4	33	26	4	11	74	
(c) (i) Resident in residential training centre ...	—	—	—	—	—	—	—	—	—	1	1	—	—	2	—	—	—	3	1	4	
(ii) Awaiting residence therein ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(d) (i) Receiving home training ...	—	—	—	—	—	—	—	—	—	—	—	1	4	—	—	1	4	—	—	5	
(ii) Awaiting home training ...	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	
(e) (i) Resident in L.A. Home/Hostel	—	—	—	—	—	—	—	2	5	—	—	9	4	—	—	11	9	—	—	20	
(ii) Awaiting residence in L.A. Home/Hostel ...	—	—	—	—	—	—	—	2	—	—	—	3	5	—	—	5	5	—	—	10	
(iii) Resident at L.A. expense in other residential Homes/Hostels	—	—	5	23	—	—	—	2	5	5	6	4	5	1	5	6	10	11	34	61	
(iv) Resident at L.A. expense by boarding out in private household ...	—	—	—	—	—	—	—	—	—	5	10	1	2	1	3	1	2	6	13	22	
(f) Receiving home visits and not included under (b) to (e) ...	—	1	229	555	—	—	3	3	13	18	188	182	18	24	63	52	31	43	483	792	1,349



*Number of Patients awaiting entry to hospital, or admitted for temporary residential care during 1965*

	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 31.12.65—																					
(a)	—	—	—	—	—	—	—	—	—	—	—	3	3	1	2	3	3	1	2	9	
(b)	—	—	—	—	—	—	—	4	2	2	2	9	7	—	2	13	9	2	4	28	
(c)	—	—	—	—	—	—	—	4	2	2	2	12	10	1	4	16	12	3	6	37	
2. Number of admissions for temporary residential care (e.g. to relieve the family)—																					
(a)	—	—	—	—	—	—	—	2	—	—	1	3	7	5	4	5	7	5	5	22	
(b)	—	—	—	—	—	—	—	2	2	—	—	7	3	—	—	9	5	—	—	14	
(c)	—	—	—	—	—	—	—	—	—	—	—	1	—	1	—	1	—	1	—	2	
(d)	—	—	—	—	—	—	—	4	2	—	1	11	10	6	4	15	12	6	5	38	

## PREVENTION OF AIR POLLUTION.

## Clean Air Act, 1956.

## SECTIONS 11-15, SMOKE CONTROL AREAS.

With the notable exception of Staines Urban District none of the local district authorities in the "new Surrey" have prepared smoke control area programmes.

The Staines Urban District Council however, although not generally considered to be in an area of heavy pollution, prepared a progressive policy of smoke control and introduced its first Smoke Control Area in 1960. By the end of 1965 about 6,500 dwellings had been dealt with under the schemes for the conversion and adaptation of coal burning grates. A phased programme will aim to ensure that the whole of the district will have been declared smokeless within the next five years.

In the Chertsey Urban District apparatus has been set up to assess the degree of atmospheric pollution and future action will depend on the results obtained from this study.

At Epsom and Ewell the local authority considers that the district does not form part of the prescribed "black area" within which the Minister of Housing and Local Government expects local authorities to set up smoke control area programmes, and the question of policy is still under discussion.

However, with the increasing tendency for householders to install central heating systems, which use smokeless fuels, and with the improvement of heating appliances in dwellings generally, smoke control is spreading gradually to all areas, irrespective of density of population. Housewives find the new appliances cleaner and more economical than the old type firegrates but, without the pressure exerted through Smoke Control Orders, or the inducement provided by 70 per cent grants on the costs of conversion, further progress towards a cleaner atmosphere in the smaller towns and villages will inevitably be slow.

## RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

The following applications from Local Authorities for the Council's observations to the Ministry of Housing and Local Government under Section 2(2) of the Act were received during 1965 and reported to the Rivers and Streams Committee or the Highways and Bridges Committee:—

Authority.	Scheme.	Estimated Cost.
		£
Bagshot R.D.C. ... ..	Sewerage—Sunningdale/Light-water	345,000
Caterham and Warlingham U.D.C. ...	Sewerage—Chaldon ... ..	61,400
Dorking and Horley R.D.C. ... ..	Sewerage—Buckland (Stage 2) ...	13,713
Dorking and Horley R.D.C. ... ..	Sewerage—Honeyrock Lane ...	19,196
Hambleton R.D.C. ... ..	Sewerage—Wanborough Lane, Cranleigh	5,227
Guildford R.D.C. ... ..	Main Drainage—Tillingbourne Valley (Phase VI B (Peaslake area))	115,844
Guildford R.D.C. ... ..	Main Drainage—Hurtmore (Priors-field Road)	12,283
Guildford R.D.C. ... ..	Main Drainage—Artington ...	36,152
Guildford R.D.C. ... ..	Main Drainage—Wisley ... ..	33,000
Hambleton R.D.C. ... ..	Main Drainage—Hydestile ...	16,550

All these schemes were approved in principle by the County Council.

## REFUSE DISPOSAL.

At the beginning of the year consents were in force in respect of 14 refuse tips granted under the provisions of Section 94 of the Surrey County Council Act, 1931.

On the 1st April, similar consents in respect of 8 tips in the Staines Urban District and 7 in the Sunbury-on-Thames Urban District were transferred from the former Middlesex County Council to Surrey, under the London Government Act, 1963.

Six applications for new consents were considered during the year. All were granted with the exception of one, by the Farnham Urban District Council, which was for consent to tip refuse in the



area of the Frimley and Camberley Urban District Council. This was not granted in view of the representation made by Thames Conservancy who objected to the proposal on the ground that it would interfere with the true flow of water through the flood plain of the River Blackwater in Frimley and Camberley.

One refuse tip taking household refuse from certain of the London Boroughs was extended in area. One tip was completed and the consent expired.

The total number of refuse tips in operation at the end of the year was 33.

All the tips are regularly inspected and any contraventions of the conditions of consent are brought to the notice of the operators.

## MILK AND DAIRIES.

### The Milk (Special Designation) Regulations, 1963.

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. Under the Regulations, every dealers' licence granted on or before 31st December, 1965 remained in force until that date, thereafter, licences are renewable for a further five-year period.

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 of the County Council continued throughout the year under 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 (including Sunbury) is eleven.

Forty-four new applications for different types of pre-packed milk licences were received and approved during the year. In addition, twenty-six requests were received for licences of a particular designation to be transferred to a new licensee. Fifty-eight different types of pre-packed milk licences were relinquished during the year, together with one Dealers' (Untreated) licence and one Dealers' (Pasteuriser's) licence. No applications were received during the year relating to sterilising or pasteurising establishments and the number of pasteurising establishments operating, therefore, at the end of 1965, was three.

The Milk (Special Designation) (Amendment) Regulations, 1965 came into operation on the 1st October, 1965. These Regulations were made to facilitate the retail sale of milk treated by the ultra-high temperature process. The Regulations were prescribed for milk which has been processed by the ultra-high temperature method, i.e. heated to not less than 270°F. for not less than one second. The amount of such milk coming on the home market in the immediate future, following these Regulations, was not expected to be very great and in actual fact by the end of December, 1965, no applications for "Ultra-Heat Treated" licences had been received.

The following table shows the number of different types of dealers' licences which have been issued from the 1st January, 1961 onwards, and which were still in force on the 31st December, 1965 in districts for which the Council is the Food and Drugs Authority:—

<i>Type of Licence.</i>	<i>Number in force on 31st December, 1965.</i>
Dealers' (Pasteuriser's) Licences ... ..	3
Dealers' (Untreated) Licences ... ..	3
Dealers' (Pre-packed Milk) Licences (Pasteurised) ... ..	167
Dealers' (Pre-packed Milk) Licences (Sterilised) ... ..	92
Dealers' (Pre-packed Milk) Licences (Untreated) ... ..	49
	<hr/> 314 <hr/>

The results of sampling during 1965 in the districts concerned are as follows:—

#### SAMPLING IN RESPECT OF DEALERS' LICENCES.

	<i>Pasteurised.</i>	<i>Sterilised.</i>	<i>Untreated.</i>
Number of milk samples taken ... ..	660	100	162
Failed phosphatase test ... ..	—	—	—
Failed methylene blue test ... ..	16	—	21
Failed turbidity test ... ..	—	—	—

It will be noticed that the total number of all types of milk sample failures total 37 (4 more than the year 1964) although the total number of samples taken—920, exceeded those taken last year (846) by 74. The highest proportion of sample failures again occurred in respect of "Untreated" milk. In seven cases the cause of failure was found to be due to the age of the milk when sampled. In another, the high atmospheric temperature at the time the sample was taken and in one instance



the bottle-washing process was found to be at fault. In the latter case the licensee was given advice as to the improvements to be made to correct the process. The cause of other failures could not be determined.

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, there being no failures either in respect of the phosphatase or the methylene blue tests :—

#### SAMPLING AT PASTEURISING ESTABLISHMENTS.

								<i>Pasteurised.</i>
Number of milk samples taken ...	...	...	...	...	...	...	...	143
Failed phosphatase test ...	...	...	...	...	...	...	...	—
Failed methylene blue test ...	...	...	...	...	...	...	...	—

#### 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 of his report are given below.

#### General.

The County Council is responsible for the administration of the Food and Drugs Act in eleven county districts in Surrey having a population of approximately 365,000 persons. The work of the Department is directed towards ensuring that food and drugs sold within the area are of the nature, substance and quality demanded by purchasers, that they contain no injurious or prohibited ingredients, and that where there are statutory standards of composition the article sold is up to standard. Vigilance is maintained to detect instances not only of adulteration but also of misdescription on labels attached to articles.

The following table gives particulars of the samples taken during the year 1965, together with comparative figures for the two previous years :—

	Milk.			Food other than milk.			Drugs.			Totals.		
	1965	1964	1963	1965	1964	1963	1965	1964	1963	1965	1964	1963
Examined ...	662	612	620	307	213	217	34	40	24	1,003	865	861
Adulterated or Irregular ...	2	17	9	44	17	15	—	1	2	46	35	26
Percentage Adulterated or Irregular ...	0.30	2.77	1.45	14.33	7.98	5.55	—	2.5	8.33	4.58	4.04	3.02
Samples per 1,000 of average annual population ...	1.81	1.88	1.96	0.84	0.65	0.69	0.09	0.12	0.07	2.74	2.66	2.72

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 93 varieties of food and 34 different drugs formed the total of 1,003 samples taken, which almost reached the target figure of 3 samples per 1,000 of the estimated population in the Council's Food and Drugs area.

#### Milk.

The position regarding milk is highly satisfactory since only two samples from the total of 662 submitted for analysis were adversely reported upon. Both of these were private purchaser's samples, the first of which possessed an unusual taste and odour, but no chemical impurities could be detected on analysis. The other sample was seen to have dark objects in the milk which proved to be mould growths that had become detached from the inside of a dirty bottle. Legal proceedings were instituted against the dairy company concerned and on conviction they were fined £10 with £2 2s. costs.

During the year 119 samples of milk were tested for the presence of antibiotics, none of which were found to contain penicillin.

#### Sausages.

Although there is still no prescribed standard for the meat content of pork and beef sausages, the 27 samples taken during the year conformed to the recommended standard of 65 per cent and 50 per cent for pork and beef sausages, respectively. Eight samples, however, contained a permitted



preservative (sulphur dioxide) which was not declared, as required, on sale. The butchers concerned were cautioned in each case. In no instance, however, did the quantity of preservative found exceed the legal amount permitted, namely 450 parts per million.

#### Bread and Flour.

Eleven informal samples of bread were taken to ascertain if the bakers of the bread were entitled to describe it as "milk bread." In each case analysis showed that the bread contained skimmed milk solids instead of whole milk solids, as is required by the Bread and Flour Regulations, 1963. The use of the description "milk bread" has therefore been discontinued by the bakers concerned.

These Regulations also require that all flour (with three exceptions) must contain a certain proportion of chalk, but a sample of Stoneground Cream Wheat flour failed in this respect. The millers concerned admitted that they did not add anything to their flour in the belief that their product was one of the exemptions. The production of this particular flour has now ceased.

#### False or Misleading Labels.

This type of offence is on the increase and is confined mainly to large food manufacturers who, in their desire to advertise new products which they are putting on the market, exaggerate the claims as to their composition or nutritional value. A number of instances were detected during the year.

### 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 1965 was 1,674.

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, 1965.

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	—	2
2... ..	—	2	2	—	2	2
3... ..	—	—	—	—	—	—
4... ..	—	—	—	—	—	—
5—10 ... ..	1	3	4	3	6	9
11—15 ... ..	—	—	—	6	9	15
16—20 ... ..	1	—	1	12	14	26
21—29 ... ..	—	—	—	17	12	29
30—39 ... ..	—	1	1	32	25	57
40—49 ... ..	6	1	7	59	43	102
50—59 ... ..	3	7	10	79	51	160
60—64 ... ..	4	7	11	40	54	94
65—69 ... ..	5	5	10	46	83	129
70—79 ... ..	32	48	80	136	263	399
80—84 ... ..	16	49	65	68	192	261
85—89 ... ..	20	44	64	67	185	252
90 and over ... ..	7	18	25	25	112	139
Unknown ... ..	—	—	—	—	—	—
	97	185	282	593	1,081	1,674

In addition to the Register of Blind Persons, a Register of Partially Sighted Persons is maintained and these number 380.

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, Health Visitors, Welfare Officers, Medical Social Workers, etc.

Before the name of any person is included on the Blind or Partially Sighted Register, medical certificate Form BDS must be completed by an Ophthalmologist. During the year 372 forms were received relating to new cases and re-examinations.



## HOME TEACHERS FOR THE BLIND.

There is now an establishment of sixteen Home Teachers whose 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, 16,077 such visits were made this year. Nine handicraft classes functioned during the year and Social Clubs now number twelve. 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 2 blind children of under school age remained at home. Of the 24 blind children of school age, 14 attended schools for the blind, 4 were not at school and 6 were ineducable.

Capitation fees are paid by the County Council to the National Library for the Blind in respect of 89 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.

Domiciliary rehabilitation, for those who for domestic or personal reasons are unable to attend the residential centres, continues. One specially trained home teacher is occupied part time in rehabilitating blind persons in their own homes.

### *Training and Employment.*

The Ministry of Labour is responsible for the training and the placement of blind persons in employment. The Royal National Institute for the Blind continues to help and advise on commercial and professional work.

Of 220 blind persons available for employment 193 were employed and 27 were unemployed.

### *Workshops for the Blind and Home Workers' Scheme.*

There are at present 7 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 19 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 outside the County.

## 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.

The Council continued to give a direct service to deaf persons (i.e. those who are "deaf without speech" and "deaf with speech") during 1965. The team of Welfare Officers was increased by one during the year, making a total of four.

An important aspect of the service is home visiting which enables the Welfare Officer to the Deaf to keep in close personal touch with deaf patients. Home visiting has brought to light many personal problems of deaf patients and has enabled the Welfare Officers to assist patients in many different ways.

The deaf in mental hospitals have regular "socials" organised by the Welfare Officers to the Deaf. An art class has been started at one hospital and some patients have revealed quite a talent for painting. Some deaf patients receive regular personal visits to create a friendship which may alleviate their mental distress.



Deaf patients need special social activities and the Welfare Officers to the Deaf encourage them to form new clubs and activities where they are needed. A new club was opened at Woking in October, 1965, and a new Youth Club was formed at Redhill during the same month. The deaf run their own clubs with guidance from the Welfare Officers to the Deaf. The clubs also enable deaf patients who go out to work to bring their problems to the Welfare Officers during the evening.

The Welfare Officers assisted deaf patients with many different kinds of problems, including interpreting in the police courts, at hospitals, at doctor's surgeries, at the National Assistance Board, and at many other places.

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 services of an Audiology Technician continued to be given to old people in homes provided by the Council and voluntary organisations. She also paid regular visits to 10 clinics and centres for the elderly during 1965. The Audiology Technician tested the hearing of 2,033 old people of whom 119 were referred for further investigation. Repairs and replacements to hearing aids and exchanges of aids were effected for 430 elderly persons.

On 31st December, 1965, the register of deaf persons was made up as follows:—

			<i>Male.</i>	<i>Female.</i>	<i>Totals.</i>
Deaf without Speech	...	...	186	132	318
Deaf with Speech	...	...	55	53	108
Hard of Hearing	...	...	64	154	218
<b>*Totals</b>	...	...	<b>305</b>	<b>339</b>	<b>644</b>

\* See also particulars of handicapped pupils on page 75.

### Other Handicapped Persons.

The Council's scheme for handicapped persons other than the blind, partially-sighted and deaf, continued to be administered during 1965 by the Council and by the Voluntary Association for Surrey Disabled who are the Council's Agents for certain parts of the service.

The establishment of Social Workers and other officers was increased as from 1st April 1965, to—

- 1 Senior Social Worker.
- 9½ Social Workers.
- 5 Welfare Assistants.
- 5 Clerk/Shorthand Typists.

and a number of professionally qualified Social Workers were appointed during the year. It was not possible, however, to recruit enough staff to bring the team up to the established strength. The Social Workers are now all based at divisional health offices or at social work centres and they have clerical assistance.

Although a start has been made in getting the register up to date, the pressure on Social Workers is very great. As soon as a new Social Worker becomes known and established in her area the work flows in from hospitals, statutory and voluntary organizations and other agencies. It is an important part of her work to keep closely in touch with workers in all these referring agencies and especially with general practitioners. Although the major part of her time is spent in visiting disabled people, the Social Worker visits clubs, classes, work centres, etc., in her own area and, on occasion, special centres and Homes at a distance in order to have a wide personal knowledge of services available for her patients.

The demand for aids and equipment and adaptations to homes of handicapped persons continues to increase. The numbers of applications approved in 1965 were as follows:—

Aids and Equipment	...	...	...	638
Adaptations costing under £25	...	...	...	11
Adaptations costing £25-£100	...	...	...	14
Adaptations costing over £100	...	...	...	7

The work involved in dealing with requests for aids and adaptations is only part, and frequently not the most important part, of the Social Workers' duties. A patient may initially need the provision of a practical aid to increase his independence but frequently it is found that he later needs the advice and guidance of the Social Worker on personal and family problems. Indeed, the main weight of the Social Worker's case load is with the many long-term patients where, through disablement, complex problems have arisen causing strain on both the disabled person and his family.

The services of the Council's team of qualified Occupational Therapists are available for disabled persons. The Head Occupational Therapist has also under his control technical instructors, craftsmen and storekeepers and this team handles the supply of aids and appliances and, in some cases, devises and constructs them.

During 1965, 23 disabled persons were sponsored by the Council in centres for training and rehabilitation or in sheltered workshops.



The transport of handicapped persons continues to be a major problem. At the end of 1965 it was estimated that about 210 severely disabled persons were being transported by the ambulance service to 27 clubs and classes, mainly at weekly intervals. A further 100 were taken by contractors hired by the Council, and over 500 less severely disabled were conveyed by voluntary drivers. 100 travelled by other means, including their own transport. The general increase in demand for services by handicapped persons is reflected in pressure on the transport facilities and the fleet of 3 special ambulances and one sitting case vehicle is to be increased by one ambulance in 1966. The existing ambulances are to be converted to incorporate mechanical loading facilities.

During 1965 a further 83 disabled persons were provided with car badges designed to ease their difficulties in finding suitable places for parking. Since the inception of this scheme in 1961, 449 drivers have received badges.

A speech therapy service for disabled persons confined to their homes was started in 1965 with the appointment of an additional speech therapist. In practice, several speech therapists are employed part-time on this service and mainly in the school health service. The aim of treatment is the restoration of communication and the advice of the speech therapist is invaluable to relatives, and other workers having the care of the patient, in showing the ways in which they can best help him.

The Voluntary Association for Surrey Disabled continued to organize, on behalf of the Council, handicraft classes, holidays and the transport of the handicapped.

On 31st December, 1965, the register of "Other Handicapped" persons was made up as follows:—

		<i>Male.</i>	<i>Female.</i>	<i>Totals.</i>
*Under 16	...	19	12	31
16-64	...	697	817	1,514
65 and over	...	283	619	902
<b>Totals</b>	...	<b>999</b>	<b>1,448</b>	<b>2,447</b>

\* See also particulars of handicapped pupils on page 75.

### Services for the Elderly.

#### *Health Centres for the Elderly.*

The first Geriatric Clinic in the County was opened at Whyteleafe in 1962. During 1965 centres were opened at Caterham Hill, Caterham Valley, Banstead, Staines, Ashford, Godalming, Esher, Cobham, Dorking and Epsom, and there were 12 centres in operation at the end of the year.

The object of these centres is to help elderly people to remain well and active for as long as possible. Health centres, which are not social clubs, have a predominantly medical aspect. Simple medical particulars of old people attending are kept; these usually include height, weight, temperature, urine and blood pressure. An important feature is discussion of the patient's diet; advice is also given on social problems. In selected cases, physiotherapy is provided after the general practitioner's permission has been obtained. Close contact is maintained with general practitioners generally and when it is observed that the elderly person is not well or is deteriorating his doctor is informed.

#### *Occupational Therapy.*

A scheme for the provision of occupational therapy for the elderly was approved in 1965. It was decided to commence the service in 1966 and this will involve the appointment of two full-time occupational therapists one of whom will deal mainly with day centres and clubs and the other with the elderly in their own homes. The scheme will be operated in close co-operation with the Surrey Association for the Elderly.

#### *Aids and Equipment.*

A scheme for the provision of aids and equipment to elderly persons was approved in 1965 and arrangements were made for it to commence as from 1st April, 1966. Geriatric Health Visitors and a wide range of other field officers who come into contact with elderly people will be able to make recommendations for aids needed for bathing, toilet, walking, etc.

#### *Audiometric Service.*

Details of the audiometric service for elderly persons will be found on page 66.



## 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.

With the implementation of the London Government Act on the 1st April, 1965 the new London Boroughs of Kingston upon Thames, Merton, Richmond upon Thames and Sutton were created with the consequent loss of these areas to the County. In addition the Urban District of Coulsdon and Purley became part of the new London Borough of Croydon. On the other hand the Urban Districts of Staines and Sunbury were transferred to the County from Middlesex. Simultaneously the Excepted Districts of the Borough of Epsom and Ewell and Urban District of Esher came into being. Woking Excepted District has been functioning as such since the 1st April, 1962.

The Registrar-General's estimated population of the Administrative County at mid-year 1965 was 967,770 which includes 132,700 children between the ages of 5-14 years inclusive. In January, 1966 there were 126,941 children on the registers of 442 county and voluntary schools.

### 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 43,388 and 19,640 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 43,388 pupils examined at periodic medical inspections 7,284 (or 16.8 per cent) were found to be in need of treatment for 7,782 diseases and defects. Table IIA shows the diseases and defects from which it will be seen that 3,966 or 51 per cent of them were defects of the nose and throat and of vision and squint. During the year 354 cases of chronic tonsillitis and adenoids were recommended for treatment and 2,183 placed under observation.

There were 10,855 defects found to be in need of treatment in the course of periodic and special inspections in 1965, and 10,986 defects, a proportion of which were found in previous years, were actually treated during the year.

#### Medical re-examination and following-up.

During 1965 school medical officers carried out 6,028 special inspections and 4,792 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" (99.9 per cent) and "unsatisfactory" (0.1 per cent).

#### Personal hygiene.

In the course of selective hygiene inspection in schools 432 pupils were found to be infested. Health Visitors who paid 3,132 visits to schools, for all purposes reported 394 cases with nits in the hair and 29 cases with lice in the hair but no verminous bodies. It was not necessary to refer any of these cases to the National Society for the Prevention of Cruelty to Children.





#### CHILD GUIDANCE

*Play therapy plays an important part of the child guidance service.*



#### MEDICAL INSPECTION

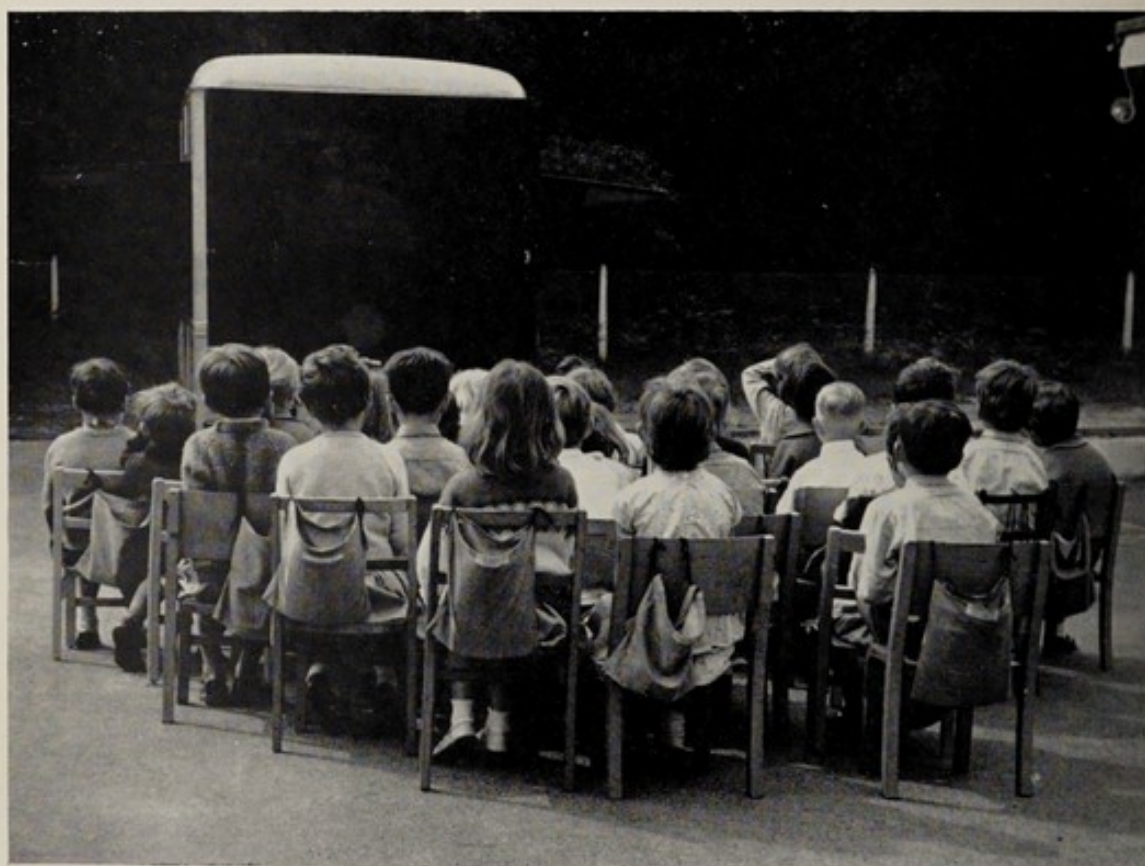
*A school doctor examines the ears of a young Surrey school child to ensure that she is able to benefit fully from her education.*





#### DENTAL HEALTH EDUCATION

*A party of Surrey school children visit a special exhibition on dental health arranged at one of the health clinics.*



#### HEALTH EDUCATION

*A Surrey Primary School class looks at a film on health projected on a mobile cinema.*

## MEDICAL TREATMENT.

**Minor ailments.**

2,731 minor ailments were treated at the clinics during 1965.

**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 attended at 26 clinics throughout the County for the purpose of carrying out refractions and, where necessary, prescribing glasses.

**Orthopaedic and postural defects.**

An orthopaedic clinic staffed by a sessionally employed orthopaedic surgeon is held in Guildford at Buryfields Clinic. The following table shows the work carried out during the year.

Number of sessions during year.	Number of children treated during 1965.	Number of attendances.	Number of new cases admitted.	Number of cases discharged.
6	87	110	38	45

In addition 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 1965.	Number of attendances.	Number of new cases admitted.	Number discharged.
N. ... ..	134	188	662	121	52
N.W. ... ..	363	197	2,656	91	83
S.E. ... ..	775	537	3,433	304	258
S.W. ... ..	318	203	1,602	113	124
Epsom and Ewell M.B. ... ..	53	75	279	55	13
Esher U.D. ... ..	42	28	101	28	7
Woking U.D. ... ..	—	—	—	—	—
Total ... ..	1,685	1,228	8,733	712	537

**Diseases and defects of ear, nose and throat.**

Minor Ailment clinics still play a small part in the treatment of lesser diseases of the ear, nose and throat. The majority of cases, however, are referred to General Practitioners and thence as necessary to hospital. Details of such treatment are given in Table IIIB.

**Ultra-violet light treatment.**

During 1965 55 children made 481 attendances for artificial sunlight treatment at school clinics.

**Health visitors.**

As in previous years state registered and enrolled nurses were employed on a part-time basis to relieve health visitors of routine medical inspection duties in secondary schools and at school clinics operated independently of infant welfare centres. This enables the health visitors to devote more time to health education in schools, and to making better contacts with head teachers to discuss health problems, while following-up in the home of children found to have defects at medical and hygiene inspections still remains an important part of their duties.

The following tables show the sessions worked by part-time school nurses and the health visitors' fixed appointments.



## A. PART-TIME SCHOOL NURSES. SESSIONS WORKED IN 1965.

Division.	Preparation for Medical Inspection.	Medical Inspection.	General Medical Clinics.	Immunisation.	Other.	Total.
N. ... ..	24	186	324	80	104	718
N.W. ... ..	49	247	342	319	52	1,009
S.E. ... ..	5	278	275	179	166	903
S.W. ... ..	—	283	160	206	36	685
Epsom and Ewell						
M.B. ... ..	2	78	1	73	96	250
Esher U.D. ...	21	—	—	2	8	31
Woking U.D. ...	—	106	65	58	53	282
Total ... ..	101	1,178	1,167	917	515	3,878

## B. HEALTH VISITORS' FIXED APPOINTMENTS IN 1965.

Division.	Preparation for Medical Inspection.	Medical Inspection.	General Medical Clinic.	Hygiene.	Teaching Sessions.	Other.	Total.
N. ... ..	18	76	244	36	96	94	564
N.W. ... ..	159	193	46	31	22	120	571
S.E. ... ..	123	302	45	44	45	—	559
S.W. ... ..	130	370	28	67	65	—	660
Epsom and Ewell							
M.B. ... ..	28	68	30	12	9	64	211
Esher U.D. ...	35	67	66	16	12	—	196
Woking U.D. ...	81	106	36	22	33	50	328
Total ... ..	574	1,182	495	228	282	328	3,089

## SPECIAL FORMS OF TREATMENT.

## Speech and hearing service.

*Audiology.*

At the request of the new London Boroughs their audiology clinics continued under the supervision of the County Audiologist for a period of six months, from the 1st of April, by which time the Boroughs of Richmond, Kingston, Merton and Sutton had had the opportunity of planning the services they required.

In the new County, three peripatetic teachers of the deaf, including the senior teacher, cover the whole area. Three qualified audiometricians share the work in the County, carrying out routine audiometry of school children in their seventh year, attending audiology clinics, and taking impressions for ear moulds. One of these technicians is also qualified to make acrylic ear inserts from impressions. This is of immense benefit to the deaf and partially hearing children of Surrey, whose inserts are ready in a matter of days, thereby avoiding the delay of several weeks which inevitably occurred when impressions were sent away for processing.

The audiology clinics have been constantly busy throughout the year. New clinics were opened at Camberley, Caterham and Egham. There are sound insulated rooms at the clinics at Guildford and Horley. These are all satisfactory, and are used not only by audiology staff, but also by Health Visitors doing routine testing of babies, seven to eight months of age. A soundproofed room is planned for the new Northern Division, where the proximity of London Airport presents noticeable problems. The proposed clinic at Staines will meet the needs of this area. It is hoped that in time all major clinics will have the facilities of a soundproofed room.

In common with other specialist services provided by the Education Committee, the Speech and Hearing Service is available to pupils of independent schools in the County on request. Regular visits were made during the year to Moor House School for Speech Defects at Oxted, Lingfield Hospital School for Epileptic Children, and White Lodge Centre for Spastic Children, at Chertsey.

The problem of providing really adequate support for partially hearing pupils attending secondary schools throughout the County has been under consideration for some time. It was ultimately decided to appoint a fourth teacher of the deaf who would be provided with a fully equipped and acoustically treated motor vehicle in which he would visit schools, thereby taking the service to the children. At the time of writing this Report, the mobile classroom has just been brought into use in the North-West and South-West Divisional Area, where the teacher will give regular help to about 50 children.







## CHILDREN RECEIVING AUDITORY TRAINING DURING 1965.

Age.	Cases Carried over from 1964.	New Cases.	Discharged to		Left District.	Remaining Dec., 1965.	Total.
			Special School.	Supervision.			
0-2 years	4	9	—	—	3	10	26
2-5 "	25	9	8	1	1	24	68
5-7 "	6	4	—	—	1	9	20
7-11 "	5	2	1	1	—	5	14
11+ "	—	2	—	—	—	2	4
Total	40	26	9	2	5	50	132

## CHILDREN UNDER SUPERVISION DURING 1965.

Age.	Cases Carried over from Previous Year.	New Cases.	Discharged.		Left District.	Remaining Dec., 1965.	Total.
			Special School.	No longer needing help or no longer at School.			
0-2 years	1	—	—	—	—	1	2
2-5 "	1	1	—	1	—	1	4
5-7 "	8	12	—	2	—	18	40
7-11 "	45	22	—	1	1	65	134
11+ "	72	6	—	4	2	72	156
Total	127	41	—	8	3	157	336

## Speech therapy.

There were 40 speech clinics in operation at the end of the year at which a total of 123 treatment sessions were held each week. Regular sessions were held also at Carwarden House, Gosden House, The Park, St. Nicholas', Temple Court and West Hill special schools. Additional sessions were provided at Ashford, Molesey, Shepperton, Spelthorne and Stanwell and regular sessions were authorised at Carwarden House and Temple Court special schools. There were 1,730 individual children treated during the year. These were mainly for stammer, lisp and underdeveloped speech. Of these 312 were discharged as cured, 141 discharged as greatly improved, 72 discharged as showing some improvement and 43 as showing little or no improvement. A table showing the work of the Speech Therapists in 1965 is given at the end of this report.

The national shortage of qualified speech therapists has presented problems of staffing in this service for several years. The situation has now been remedied to a certain extent by the appointment of several married therapists who are able to work a few sessions each week.

Regular area meetings of speech therapists have been arranged by the three senior therapists, and one general meeting was held at County Hall. These meetings offer excellent opportunities for therapists to make personal contacts and exchange views with their colleagues. This year has been a time for settling in, with adjustments being made within the new framework.

## Child guidance service.

The following table shows the total authorised establishment for all staff in the child guidance and school psychological service. The services of psychiatrists for two sessions a week at Pentlands Remand Home, four sessions a week at Mayford Approved School and eight sessions a month at Banstead Hall Approved School together with an Educational Psychologist for one session a month at Banstead Hall Approved School are also provided on behalf of the Children's Committee. The recruitment of suitably qualified staff continued to present difficulties because of the national shortage.



Clinic, School or Hostel.	Professional and clerical staff employed expressed as a proportion of full-time.				
	Psychiatrists.	Educational Psychologists.	Social Workers.	Psycho-therapists.	Clerical.
Farnham... ..	0.4	1.0	0.5	0.4	1.0
Godalming... ..	0.4	1.0	0.5	0.4	1.0
Guildford... ..	0.9	2.0	2.0	1.4	2.0
Chipstead... ..	0.6	1.0	1.0	0.4	1.0
Redhill... ..	0.6	1.0	1.0	0.6	1.0
Epsom... ..	0.5	1.0	1.0	0.4	1.0
Leatherhead... ..	0.1	1.0	0.2	0.4	—
Hersham... ..	0.6	1.0	1.0	0.4	1.0
Woking... ..	1.0	2.0	2.0	0.5	2.0
Staines... ..	0.6	1.0	1.0	0.4	1.0
The Lindens... ..	0.2	—	—	—	—
Thornhatch... ..	0.1	—	—	—	—
Starhurst... ..	0.1	—	—	—	—
Wishmore Cross... ..	0.1	—	—	—	—
Total equivalent full-time... ..	6.2	12.0	10.2	5.3	11.0

The educational psychologists devote half their time to work in the child guidance clinics and half to the school psychological service.

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

Clinic.	Chipstead	Epsom	Farnham	Godalming	Guildford	Leatherhead	Redhill	Staines	Woking	Total
No. of cases referred during year... ..	34	21	84	54	134	55	130	127	146	785
No. of new cases seen... ..	49	9	70	37	124	29	90	117	127	652
No. of cases discharged... ..	17	9	67	36	126	5	15	25	29	328
Analysis :—										
(a) Treatment completed... ..	7	8	35	14	45	2	7	2	12	136
(b) No treatment required... ..	1	—	11	6	54	2	6	14	9	99
(c) Non-co-operation of parents... ..	2	1	8	3	10	1	—	6	4	29
(d) Other arrangements made... ..	7	—	13	13	17	—	2	3	4	64
No. of cases under treatment at end of year	25	18	15	26	39	5	183	23	39	373
No. of cases under supervision at end of year... ..	58	13	10	32	103	13	143	95	64	531
No. of cases withdrawn from waiting list during year... ..	11	11	7	8	15	23	15	12	23	125
No. of cases remaining on waiting list at end of year... ..	—	9	16	18	13	19	43	10	19	147
No. of interviews by psychiatrists... ..	1,007	135	547	268	1,005	122	719	330	975	5,108
Analysis :—										
(a) With children for examination... ..	121	13	110	49	177	35	73	205	127	910
(b) With children for treatment... ..	754	52	185	102	341	—	307	89	618	2,448
(c) With parents... ..	88	18	192	96	392	39	272	11	160	1,268
(d) With others... ..	44	52	60	21	95	48	67	25	70	482
No. of sessions held :—										
(a) Psychiatrists... ..	322	109	190	107	393	35	335	192	318	2,001
(b) Educational psychologists... ..	197	32	270	468	480	14	316	43	217	2,036
(c) Psychotherapists... ..	32	151	37	137	253	172	316	—	—	1,098
(d) Social workers... ..	122	313	67	226	228	145	231	—	335	1,667

The recruitment of staff remains a serious problem. As a remedial measure, a scheme was initiated in the spring of 1965 for sponsoring candidates on approved courses in educational psychology. Honours Graduates in psychology, with three years' teaching experience, are appointed as Assistant Educational Psychologists, subject to their obtaining a place on one of the approved courses for Educational Psychologists and subsequently returning to the service of the County for a period normally not less than two years. Four Assistant Educational Psychologists were recruited during the year, and on completion of their training will take up their duties from July, 1966.

In view of the success of this scheme, it is hoped to organise similar training facilities for Social Workers in the child guidance field.

Although markedly under establishment, all nine child guidance clinics have continued to render extremely good service throughout the year. Great credit is due to the staff, who have made considerable efforts to overcome this problem.

The Staines Child Guidance Clinic became part of the County service on the 1st April, 1965. This clinic had been previously staffed by a psychiatrist provided by the Regional Hospital Board for two sessions each week. It is very satisfactory to record that continuity was maintained, as the psychiatrist agreed to transfer her services to the County. To bring Staines into line with other Surrey clinics, the number of psychiatric sessions has now been increased to six each week. Epsom Child Guidance opened in new premises in the autumn, and is now well established.

In an effort to meet the problems involved in providing psychiatry for older children and also of making it easier for parents to attend for interview, the practice of holding some evening sessions has been extended to most of the clinics in the County. Nevertheless, the problem of meeting the psychiatric needs of the adolescent population is one which causes great concern, particularly in regard to the placing of urgent adolescent cases in in-patient beds.

### 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 and 1962, 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 may require special educational treatment if 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 Department of Education and Science 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 following table shows the number of Surrey children as at 31st December, 1965, who were ascertained as handicapped pupils and the provision made for their education :—

Category.	Total Handi- capped Pupils.		Recommended for Special School or Hostel.										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 home or in hospitals or in Private School.								
			Provided by Surrey.		Other.	Total.														
Blind ...	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G	B	G
Partially sighted ...	11	7	—	—	10	6	10	6	—	—	—	—	—	1	—	—	—	—	1	—
Deaf ...	20	18	—	—	12	11	12	11	—	1	—	—	7	6	—	—	—	—	1	—
Partially hearing ...	30	16	11	8	19	8	30	16	—	—	—	—	—	—	—	—	—	—	—	—
Educationally sub-normal	121	90	15	14	22	6	37	20	—	—	—	—	74	65	—	—	—	—	3	2
Epileptic ...	731	404	359	191	91	49	450	240	10	15	87	56	114	71	1	1	—	—	47	12
Maladjusted ...	29	16	—	—	13	6	13	6	—	—	—	—	11	6	1	—	—	—	3	3
Physically handicapped	210	88	101	21	69	42	170	63	3	1	12	8	4	3	1	1	13	4	7	4
Delicate ...	256	147	—	—	143	80	143	80	1	2	9	4	27	15	18	7	30	17	10	9
Speech defect	136	74	37	18	40	15	77	33	6	3	7	2	15	8	—	1	—	—	30	25
Totals ...	12	7	—	—	4	3	4	3	—	—	6	3	2	1	—	—	—	—	—	—
Totals ...	1,556	867	523	252	423	226	946	478	20	22	121	73	254	175	21	11	43	21	102	55



### Special schools and hostels.

The following are provided by the Education Committee :—

Handicap.	Name and Address of School/Hostel.	Accommodation.	Age Range.
Educationally Sub-normal	Bramley, Gosden House ... ..	80 G. } 20 B. } Boarding 20 M. }	} G. 7-16 } B. 7-10
	Camberley, Carwarden House (temporary) ...	60 M. Day	
	Guildford, Temple Court (temporary) ...	40 M. Day	7-12
	Leatherhead, West Hill ... ..	120 M. Day	7-16
	Redhill, St. Nicholas ... ..	100 B. } 20 B. } Boarding 20 B. } Day	} 10-16
	Woking, The Park ... ..	170 M. Day	
Delicate and physically handicapped	Guildford, Sunnydown ... ..	40 B. Boarding	10-16
	Oxted, Limsfield Grange ... ..	30 G. } 8 B. } Boarding	} G. 5-16 } B. 5-10
Deaf ... ..	Caterham, Portley House ... ..	40 M. Boarding	
	Redhill, Nutfield Priory ... ..	80 M. Boarding	3-11½ 11½-16
Partially hearing ... ..	Ewell, Riverview County Primary ... ..	20 M. Day	5-11
	Woking, Woodlands County Primary ... ..	15 M. Day	5-11
Maladjusted ... ..	Camberley, Wishmore Cross ... ..	40 B. Boarding	11-16
	Dorking, Starhurst ... ..	30 B. Boarding	11-16
	Guildford, Thorchace, Merrow (Hostel) ...	18 M. Boarding	G. 5-12 B. 5-11
	Guildford, Grove Class, Merrow (day class) ...	15 M. Day	7-12
Special Unit for severely disturbed children	Epsom, The Lindens, c/o St. Ebba's Hospital	25 M Day	2-11
Retarded ... ..	Epsom, Clayhill Centre (remedial class) ...	32 M. Day	5-11
	Redhill, Ardmore Centre (remedial class) ...	32 M. Day	5-11

During the autumn of 1965, the Committee opened a special educational unit to cater for young children suffering from severe behaviour disturbances who are unsuited to education by any existing process.

"The Lindens" is a self-contained building situated in its own enclosed garden on the perimeter of the St. Ebba's Hospital grounds. Initially, provision has been made for some 25 children attending on a day basis. Children are admitted from Surrey and from surrounding authorities.

"The Lindens" is a development of the pioneer project previously carried on successfully at Holmwood House, Wimbledon, now no longer in the possession of Surrey County Council. While the particular object in opening the new unit has been to provide special education for autistic children, disturbed children who can communicate are also admitted, as the approach adopted is that of mixing non-communicating children and communicating children to their mutual benefit. The teacher in charge, and the Consultant Psychiatrist work in close collaboration, and are assisted by a staff specially chosen for their qualifications and experience.

It is the Committee's intention that research into the treatment of autism should be conducted in the unit. It is also intended to provide training for further personnel, with the possibility that a gradual expansion of the service may take place in the light of experience gained.

The Ardmore Centre for Remedial Education at Reigate also opened in the latter part of last year. This Centre provides remedial education for up to 30 boys and girls of primary age who attend part-time while remaining on the roll of their contributory schools.

It is expected that the Woburn Hill School at Chertsey will open in January, 1967, accommodating 120 educationally sub-normal boys and girls of primary and secondary age. The Greystone School (in premises now occupied by the Albury Manor Infant and Junior Schools) will open at the same time also accommodating a similar number of educationally sub-normal pupils.

Special school projects approved by the Department of Education and Science in Major Building Programmes include the provision of a purpose built residential school for about 50 maladjusted girls of secondary age, the replacement of the 2 temporary schools for educationally sub-normal children at Guildford and Camberley (Temple Court and Carwarden House Schools) and the rebuilding of the Park School at Woking.

### Hospital schools.

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

- Pyrford, The Rowley Bristow Orthopaedic Hospital School.
- Epsom, Long Grove Hospital School.
- Tadworth, Tadworth Court Hospital School.

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

#### Home tuition.

There are some handicapped children who, during the waiting period for admission to residential schools, or because of the severity of their disabilities, have to be provided with education in their own homes and at the end of the year there were 32 children being educated in this way.

#### Mental health.

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 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 consistently reduced and no children were formally reported to the County Health Committee in 1965 as unsuitable for education at school.

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. However, local education authorities 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 126 children admitted to convalescent homes during the year. 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 1965 :—

Disease.	Suffering.	Excluded on suspicion.	Infection at home.	Total exclusions.
Small Pox ... ..	—	—	—	—
Diphtheria ... ..	—	—	—	—
Scarlet fever ... ..	182	2	12	196
Enteric fever ... ..	—	—	—	—
Measles ... ..	3,277	29	50	3,356
Whooping cough ... ..	111	8	—	119
German measles ... ..	410	3	5	418
Chicken-pox ... ..	2,823	22	10	2,855
Mumps ... ..	803	1	10	814
Jaundice ... ..	15	1	1	17
Other ... ..	106	4	1	111
Totals ... ..	7,727	70	89	7,886

### CONTAGIOUS DISEASES.

Disease.	Suffering.	Excluded on suspicion.	Total exclusions.
Ringworm ... ..	2	—	2
Impetigo ... ..	30	1	31
Scabies ... ..	2	—	2
Other ... ..	53	—	53
Totals ... ..	87	1	88

#### Tuberculosis in schools.

During the year five schoolchildren, one school teacher and one canteen assistant were notified as suffering from pulmonary tuberculosis and, after consultation with the Chest Physicians concerned, it was decided that special investigations should be carried out in three of the schools involved, 1 in a County school and 2 in Independent schools.



In the three investigations 659 pupils were Mantoux tested and, excluding 106 children known to have had earlier B.C.G. vaccination, 26, or 3.9 per cent were found to be Mantoux positive. These positive reactors were given chest X-ray examinations which were satisfactory in every case.

A great deal of work by the Chest Physicians and Divisional Medical Officers is involved in these investigations and the following summary of the Divisional Medical Officer's report on one of the three above-mentioned cases may be of interest :—

The school was visited in April for Mantoux tests and in May for reading the tests and B.C.G. vaccination where necessary. Two further visits were paid in May to pick up absentees. Yet another visit was paid in July to Mantoux test negative reactors who had not been vaccinated with B.C.G. Absentees from the July test were tested and read during two visits in November.

The Mass X-ray Unit went to the school in June and examined 111 pupils and 65 members of the teaching and other staff. As a result of this survey two were referred to the Chest Clinic but nothing significant was found. In addition another ten children under the age of ten had a full x-ray at various hospitals at the parents' request and were found to be clear. These activities may be summarised as follows :—

Number on roll	...	...	...	...	...	...	...	524
Number of acceptances	...	...	...	...	...	...	...	476
Letters from parents making other arrangements	...	...	...	...	...	...	...	17
Number Mantoux tested	...	...	...	...	...	...	...	461
Number X-rayed included those at parents' request	...	...	...	...	...	...	...	121
Positive reactors previously vaccinated with B.C.G.	...	...	...	...	...	...	...	97
Positive reactors not previously vaccinated with B.C.G.	...	...	...	...	...	...	...	22
Number of negative reactors	...	...	...	...	...	...	...	342
Negative reactors—								
Number vaccinated with B.C.G.	...	...	...	...	...	...	...	164
Number refusing vaccination for various reasons	...	...	...	...	...	...	...	7
Number of negative reactors under the age of 10 not vaccinated	...	...	...	...	...	...	...	171

Nothing significant was found following this survey and it is fortunate that this open case of tuberculosis did not cause any serious trouble. This might be due to the fact that a fair proportion of class contacts of the index case had already been vaccinated with B.C.G. or that the case had not been infectious for very long. The child evidently did not acquire her infection at school and it is highly probable that she was already infected on arrival from abroad in September 1964. The patient was treated for two months in Brompton Hospital and has now returned to her home.

The Head of the school was most co-operative and extremely helpful in placing at our disposal all the necessary facilities for skin testing and B.C.G. vaccination.

## 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 1965 are described in the County Medical Officer's annual report.

## PROMOTION OF HEALTH.

### Health Education.

The personal approach to staff and students outlined in my previous report was taken a stage further during the year by the provision of study days on health education in primary schools. Seven such conferences were planned, four of which were carried out this year. One hundred and forty-five heads of schools attended the lectures and discussions provided by the staff of the department and of colleges of education, while members of the county inspectorate of the Education Department presided. Emphasis was laid on two aspects: the need for systematic health education in all stages at school, and the need for full co-operation between the staff of the School Health Service and the teaching staff. Subsequently, there was an increased demand for the teaching services of the health visitors on topics related to the growth and development of the schoolchild. Working in close collaboration with the teaching staff health visitors have dealt with a wide variety of topics in this field of which the following are a selection: mothercraft, dental care, smoking and health, personal hygiene, teenagers' feet, growing up, looking ahead, accidents in the home, make-up and skin care, nursing as a career, the health services, environmental health, and personal relationships. In one area a portable display stand was obtained and used to project a special subject throughout the schools each term. Topics chosen during the three terms were: personal health, care of the feet, and immunisation and vaccination with emphasis on B.C.G. Training staff of the County Ambulance service provided illustrated talks and demonstrations on first aid and mouth-to-mouth resuscitation at a number of schools. Of special interest was the inclusion of talks on health in a "Learning to Earning" programme for school-leavers given by the Health Education Officer.

Throughout the year illustrative teaching material was distributed to schools, colleges and youth clubs. This took the form of posters, wallcharts, leaflets and booklets, filmstrips, flannelgraphs and films on special hire on a wide field of interest.

### Dental health education.

The health education work of one of the dental surgery assistants was expanded to full-time capacity this year. Primary and secondary schools, mainly in the south-eastern part of the County, were visited and provided with illustrated lessons in dental care and oral hygiene. This officer was fully equipped with projection equipment and a wide range of other teaching aids. Posters and charts were provided for display in the schools and literature appropriate to the age group was distributed at the conclusion of each visit.



A dental health campaign was launched in the South-Western Division as a second follow up to the main campaign held in 1961-62. The first follow up was carried out in 1963. In collaboration with the Oral Hygiene Service and the divisional medical, dental, nursing and teaching staff, arrangements were made to revisit all schools which participated in the original scheme. Two lecturers shared the work over a period of some three months. 5,000 leaflets and 150 posters were provided and the teaching was illustrated by flannelgraph, poster-charts and filmstrips.

During the week 14th-18th June the use of a mobile cinema van was obtained to serve the smaller rural schools. The van, on hire free of charge from the Oral Hygiene Service, was driven and the cinema operated by a member of the County Health technical staff. A well-attended meeting of parents in a school situated centrally was held to see a new film on dental health and to take part in an "Any Questions?" discussion.

The following statistical summary may be of interest :—

Number of primary schools visited	...	...	...	...	24
Number of secondary schools visited	...	...	...	...	6
Total number of talks given	...	...	...	...	123
Total number of children attending	...	...	...	...	7,852
Mobile cinema van mileage	...	...	...	...	125
Total cost	...	...	...	...	£50

One of the lecturers reported :—

"The reception at all schools was first class. It would appear that the heads expect a two-yearly follow up and are in favour of our continued promotion of dental health. Most schools are including care of the teeth in the general curriculum; this was obvious from the intelligent questions asked. In all schools the co-operation from heads and staff concerned has been most commendable."

During the tour visits were paid by members of the medical and dental supervisory staff, the county inspectorate and the director of the Oral Hygiene Service.

Another successful venture was carried out in one of the twin-surgery dental clinics. The suite of dental rooms was arranged as a special exhibition on dental health, each room depicting a different aspect of the work. Over 1,300 children from thirteen schools in the neighbourhood were organised in small groups and escorted by their teachers to view the exhibition. The first room illustrated the prevention of dental disease and the home care of teeth. This section was in charge of the dental hygienist. The office, which contained material on careers in dentistry and general information, was supervised by the dental surgery assistant who passed the young visitors on to the dental surgeon. In the main surgery children were shown all the very latest in dental equipment and were given a short talk on conservation, root treatment and other specialised work. Finally, the parties were directed to an information room fitted out with portable panels on every aspect of dental care. Short discussions were then held before the children were returned to school, each child with a packet of literature appropriate to its age group and a free tube of toothpaste. The whole project took nearly two weeks to carry out apart from the time spent in preparation. One child, writing to the dental staff afterwards on behalf of her school said :—

"Thank you for having us. It must have had a good effect on us. I and the rest of the class found it very interesting. We hope to come again some time."

The dental health education programme in schools in the Urban District of Woking described in my previous report continued throughout the year with emphasis on secondary schools. Throughout the County dental officers, health visitors and health education officers continued to provide talks for Schools and parent-teacher associations on request.

#### *Smoking and health.*

The main emphasis of the programme dealing with smoking as a health hazard shifted into the field of further education. Talks illustrated by films were given to youth organisations, technical colleges and schools of art. A forceful display was mounted in the entrance hall of one school of art for a week. The medical evidence concerning smoking was strikingly portrayed and a great deal of literature on the subject was distributed to staff and students.

Finally, much advisory work on a personal basis has been carried out by the health education officers for teachers and others dealing with the education of children. The preparation of schemes of work, syllabuses, lesson notes, reference lists of books, teaching aids and other media have been provided as required.

#### **Report on physical education.**

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

The rate of progress in physical education remarked upon in the report for 1964-5 has not only been maintained but has been accelerated. Refresher courses for serving teachers have been increased both in numbers and scope and have been attended by many hundreds of teachers and others interested in physical education. Close co-operation has been established between the Surrey inspectors of physical education and the newly-appointed organisers of physical education in the Boroughs of Sutton and Merton, and teachers from these Boroughs have regularly attended Surrey courses.



The use of De Burgh County Secondary School as a "P.E. Workshop" has been continued, and work begun at a second main centre, Hythe County Secondary School, Egham. Demonstrations of work and discussions of problems were also arranged during the summer term at various rural primary schools and proved interesting and useful.

Opportunities for Surrey pupils to take part in outdoor activities have been extended during the year. A Surrey orienteering club has been established, has held frequent meetings at weekends, and was extremely successful in the English championships. Many school parties have visited Scotland, the Lake District and Snowdonia for rock climbing and a ski-ing party visited Davos in December as in previous years. The Thames Young Mariners' Base at Ham is in constant use for sailing and canoeing and there is a growing interest generally in water sports. Once again courses for teachers interested in swimming have been arranged and have proved popular and successful.

Playing field provision is being gradually extended and the Committee's grants for the improvements of physical education facilities in primary and secondary schools have been used to increase the amount of equipment for gymnastics, sports and swimming and to improve storage facilities.

The Committee has not yet succeeded in purchasing an outdoor activities centre in Wales but efforts are still being made to find and equip a suitable centre.

There is an upsurge of enthusiasm at primary level for modern educational gymnastics, the art of movement, and for camping. At secondary level, especially for Vth and VIth forms, squash, golf, tennis, table tennis, sub-aqua swimming and riding are becoming popular. For the majority of older pupils future trends appear to lead away from the established national major games and towards the individual and more social activities and sports. This is throwing a greater load of responsibility upon the specialist teachers of physical education but they are, on the whole, meeting the challenge of this extra work and organisation extremely well.

It is true to say that the standard of work throughout the whole age range is showing marked improvement and that the future prospects are bright.

#### Open air education.

##### *Summer camp.*

The season at Henley Fort camp commenced on the 8th May and extended to 28th August. During this period no serious illness occurred. The following statistics are given for 1965 :—

Number of children	...	...	...	...	...	...	347
Number of staff	...	...	...	...	...	...	36
Number of parties	...	...	...	...	...	...	10
Average cost of food per head per week...	...	...	...	...	...	...	£1/16/6d.

##### *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 (based on the annual October returns) as to the number of pupils taking milk and meals at maintained schools.

Number in Attendance.	Number taking milk.	Percentage taking Milk.	Number taking meals.	Percentage taking meals.	Cost of meal.	Percentage taking meals at	
						Full cost.	Free.
116,775	89,062	76	89,308	76	1/-	97.4	2.6

#### FURTHER EDUCATION AND TRAINING OF DISABLED PERSONS.

At 31st December, 1965, the Education Committee was responsible for the maintenance and training at residential institutions of 10 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 By-laws regulating the employment of children, provide for the medical examination of children in part-time employment annually.

1,631 children were medically examined during the year as to their fitness to take part-time employment and only one was 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 1,809 examinations and re-examinations were carried out for this purpose.

There were 37 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 1965.

*Accommodation and Equipment.*

The number of dental clinics in the new County is forty. New clinics came into operation during the year at Berkshire Road, Camberley; Buryfields, Guildford; Victoria Road, Horley; and Church Street, Epsom. The clinic at Camberley is additional, while the other three clinics replace existing old premises. In each case, the dental suite is self-contained and the equipment includes a dental unit, airtor and X-ray apparatus. In several clinics new items of equipment have been installed to improve existing facilities.

Additionally, treatment was provided in accommodation available in five schools. Arrangements were continued for inspection and treatment for children attending four residential schools located in Surrey and administered by other Local Authorities, the costs being reimbursed.

*Staff.*

On the 31st December, 1965 the full-time staff consisted of 20 dental officers including two orthodontists and 22 part-time officers including three orthodontists equivalent to 6.7 additional full-time officers. Although recruitment of staff presents difficulties, four full-time dental officers were appointed during the course of the year.

There were few applicants for posts of dental surgery assistants but vacancies within the establishment were filled by part-time staff. Six full-time assistants were successful in passing the National Examination for Dental Surgery Assistants.

*County Dental Laboratory.*

The County Dental Laboratory which was transferred to new premises in 1963 was designed to serve the whole of the former County. The new London Boroughs of Kingston-upon-Thames, Merton and Sutton which were formerly part of the County agreed to use the facilities of the Laboratory after the 1st April, 1965 on a cost-sharing basis and these arrangements are continuing.

At the end of the year the staff consisted of a Chief Dental Technician assisted by three technicians and two apprentices.

The following table shows the record of the work of the Laboratory in connection with the School Dental Services. The figures in brackets give the total work including that for the Maternity and Child Welfare Services.

Orthodontic Appliances.	Dentures.	Repairs.	Crowns and Inlays.	Reference Models.	Other Mechanical Operations.	Total No. of Operations.
2,114 (2,114)	186 (296)	272 (312)	132 (138)	3,143 (3,143)	153 (325)	6,000 (6,328)

*Dental Inspection and Treatment.*

The number of children examined at routine school inspections was 82,791 and a further 10,945 were inspected or re-inspected at various clinics making a total of 93,736. Fillings in permanent teeth numbered 37,621 and in temporary teeth 15,909, a total of 53,530. The number of permanent teeth extracted was 3,559 and temporary teeth 8,395. Statistical information is given in Table IV.

*Orthodontic Service.*

Orthodontic treatment was carried out by two full-time officers and three part-time officers specially engaged for this purpose. In addition, most dental officers undertake a limited amount of orthodontic treatment. Most of the cases were treated by removable appliances (1,232) but in addition, 43 fixed appliances were fitted. In some cases the treatment included the extraction of teeth to relieve overcrowding. The use of X-rays plays an important part in the planning of treatment and facilities for the taking and processing of X-ray films are available at twenty clinics throughout the County.



### *Courses.*

During the year, one officer attended a post-graduate course in orthodontics arranged by the British Dental Association at the University of Keele. A dental surgery assistant attended a course on the subject of dental health education arranged by the General Dental Council and two members of the staff attended the Annual Conference of the British Dental Association. Instruction in dental X-rays was available through the courtesy of Kodak Limited.

### *Surveys.*

At the request of the Department of Education and Science, this Authority, one of several representing different parts of England and Wales took part in a survey of the dental condition of a 10 per cent sample of girls and boys aged 15 years in which 1,237 pupils were examined.

The Society of Medical Officers of Health in collaboration with the dental staff of Liverpool University sponsored a survey of diet and dental caries in young children. A 1/100 sample of children aged one and two years was taken from the birth registers and health visitors in domiciliary visits completed 240 questionnaires in connection with feeding habits of young children.

### *Dental Health Education.*

Further progress was made in the field of dental health education, details of which are given under Promotion of Health.

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)
1961 and later ...	314	314	100	—	0
1960 ...	8,349	8,340	99.89	9	0.11
1959 ...	4,032	4,019	99.68	13	0.32
1958 ...	1,182	1,179	99.75	3	0.25
1957 ...	8,053	8,038	99.82	15	0.18
1956 ...	1,186	1,185	99.99	1	0.01
1955 ...	357	357	100	—	0
1954 ...	3,419	3,415	99.88	4	0.12
1953 ...	3,782	3,779	99.83	3	0.17
1952 ...	1,767	1,764	99.88	3	0.12
1951 ...	1,928	1,928	100	—	0
1950 and earlier ...	9,019	9,008	99.86	11	0.14
TOTAL ...	43,388	43,326	99.86	62	0.14

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.
1961 and later ...	5	36	39
1960 ...	283	1,139	1,258
1959 ...	136	612	690
1958 ...	68	181	215
1957 ...	424	766	1,101
1956 ...	124	149	235
1955 ...	37	62	84
1954 ...	305	365	596
1953 ...	341	379	682
1952 ...	219	147	324
1951 ...	191	145	318
1950 and earlier ...	1,064	740	1,741
TOTAL ...	3,296	4,721	7,284

C.—OTHER INSPECTIONS

Number of Special Inspections ...	6,028
Number of re-inspections ...	4,792
Total ...	10,820

D.—INFESTATION WITH VERMIN.

(a) Total number of individual examinations of pupils in schools by school nurses or other authorised persons ...	39,401
(b) Total number of individual pupils found to be infested ...	432
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54(2), Education Act, 1944) ...	4
(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 of Disease.	PERIODIC INSPECTIONS.							
	Entrants.		Leavers.		Others.		Total.	
	(T)	(O)	(T)	(O)	(T)	(O)	(T)	(O)
Skin ... ..	110	326	248	344	258	599	616	1,269
Eyes—								
(a) Vision ... ..	291	897	1,346	843	1,496	1,676	3,133	3,416
(b) Squint ... ..	130	151	45	50	162	198	337	399
(c) Other ... ..	21	59	24	115	44	217	89	391
Ears—								
(a) Hearing ... ..	94	451	72	106	122	542	288	1,099
(b) Otitis Media ... ..	73	345	15	41	36	359	124	745
(c) Other ... ..	23	111	22	54	42	121	87	286
Nose and Throat ... ..	250	1,353	53	281	193	1,444	496	3,078
Speech ... ..	125	337	11	39	111	335	247	711
Lymphatic Glands ... ..	37	480	1	56	9	504	47	1,040
Heart ... ..	14	227	18	142	12	257	44	626
Lungs ... ..	83	300	30	173	73	457	186	930
Developmental—								
(a) Hernia... ..	13	76	2	15	9	64	24	155
(b) Other ... ..	35	390	12	134	74	554	121	1,078
Orthopaedic—								
(a) Posture ... ..	29	135	51	268	94	407	174	810
(b) Feet ... ..	185	448	66	204	257	767	508	1,419
(c) Other ... ..	84	405	76	399	96	554	256	1,358
Nervous System—								
(a) Epilepsy ... ..	11	31	9	16	17	51	37	98
(b) Other ... ..	19	92	9	40	17	107	45	239
Psychological—								
(a) Development ... ..	6	106	32	35	92	216	130	357
(b) Stability ... ..	36	308	11	94	53	427	100	829
Abdomen ... ..	21	98	14	50	22	145	57	293
Other ... ..	196	352	88	226	352	657	636	1,235
Total ... ..	1,886	7,478	2,255	3,725	3,641	10,658	7,782	21,861

T=Treatment. O=Observation.

B.—SPECIAL INSPECTIONS.

Defect or Disease.	Special Inspections.	
	requiring treatment.	requiring observation.
Skin ... ..	351	74
Eyes—		
(a) Vision ... ..	577	626
(b) Squint ... ..	86	16
(c) Other... ..	39	26
Ears—		
(a) Hearing ... ..	214	484
(b) Otitis Media ... ..	8	24
(c) Other... ..	62	27
Nose and Throat ... ..	299	194
Speech... ..	168	77
Lymphatic Glands ... ..	7	26
Heart ... ..	14	60
Lungs ... ..	36	71
Developmental—		
(a) Hernia ... ..	10	3
(b) Other ... ..	27	38
Orthopaedic—		
(a) Posture ... ..	23	32
(b) Feet ... ..	66	62
(c) Other... ..	97	70
Nervous System—		
(a) Epilepsy ... ..	5	8
(b) Other... ..	7	15
Psychological—		
(a) Development ... ..	152	113
(b) Stability ... ..	105	95
Abdomen ... ..	39	46
Other ... ..	197	289
Total ... ..	2,591	2,576

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 ... ..	126
Errors of refraction (including squint) ... ..	6,358
Total ... ..	6,484
Number of pupils for whom spectacles were prescribed ... ..	2,749

## 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 ... ..	14
(b) for adenoids and chronic tonsillitis ... ..	652
(c) for other nose and throat conditions ... ..	56
Received other forms of treatment ... ..	447
Total ... ..	1,169
Total number of pupils in schools who are known to have been provided with hearing aids :—	
(a) in 1965 ... ..	23
(b) in previous years ... ..	178

## C.—ORTHOPAEDIC AND POSTURAL DEFECTS.

	Number of cases known to have been treated.
(a) Pupils treated at clinics or out-patients departments ... ..	1,557
(b) Pupils treated at school for postural defects ... ..	254
Total ... ..	1,811

## D.—DISEASES OF THE SKIN.

	Number of cases known to have been treated.
Ringworm—	
(a) Scalp ... ..	4
(b) Body ... ..	2
Scabies ... ..	2
Impetigo ... ..	8
Other skin diseases ... ..	690
Total ... ..	706

## E.—CHILD GUIDANCE TREATMENT.

	Number of cases known to have been treated.
Pupils treated at Child Guidance Clinics ... ..	701

## F.—SPEECH THERAPY.

	Number of cases known to have been treated.
Pupils treated by speech therapists ... ..	1,730



## G.—OTHER TREATMENT GIVEN.

	Number of cases known to have been dealt with.
(a) Pupils with minor ailments ... ..	1,452
(b) Pupils who received convalescent treatment under School Health Service arrangements	126
(c) Pupils who received B.C.G. vaccination ...	6,853
(d) Other than (a), (b) and (c) above :—	
Lymphatic Glands ... ..	48
Abdomen ... ..	166
Heart and Circulation ... ..	40
Lungs ... ..	177
Development ... ..	137
Nervous System ... ..	62
Psychological ... ..	116
Other ... ..	70
Total (a) to (d) ... ..	9,247

TABLE IV.

## DENTAL INSPECTION AND TREATMENT.

3. Attendances and Treatment.	Ages	5 to 9	10 to 14	15 and over	Total
First visit ... ..		9,516	9,108	2,555	21,179
Subsequent visits ... ..		13,919	19,932	5,559	39,410
Total visits ... ..		23,435	29,040	8,114	60,589
Additional courses of treatment commenced ... ..		1,220	1,117	485	2,821
Fillings in permanent teeth ... ..		8,627	21,426	7,568	37,621
Fillings in deciduous teeth ... ..		14,179	1,730	—	15,909
Permanent teeth filled ... ..		7,162	17,874	6,216	31,252
Deciduous teeth filled ... ..		12,423	1,490	—	13,913
Permanent teeth extracted ... ..		465	2,300	794	3,559
Deciduous teeth extracted ... ..		6,128	2,267	—	8,395
General anaesthetics ... ..		2,224	1,330	164	3,718
Emergencies ... ..		612	410	115	1,137
Number of pupils X-rayed ... ..					1,353
Prophylaxis ... ..					3,374
Teeth otherwise conserved ... ..					4,561
Number of teeth root filled ... ..					135
Inlays ... ..					28
Crowns ... ..					124
Courses of treatment completed... ..					18,296
4. Orthodontics.					
Cases remaining from previous year ... ..					1,149
New cases commenced during year ... ..					552
Cases completed during year ... ..					314
Cases discontinued during year ... ..					90
Number of removable appliances fitted ... ..					1,232
Number of fixed appliances fitted ... ..					43
Pupils referred to hospital consultant ... ..					15
5. Prosthetics.	Ages	5 to 9	10 to 14	15 and over	Total
Pupils supplied with F.U. or F.L. (first time) ... ..		5	—	29	34
Pupils supplied with other dentures (first time) ... ..		28	27	51	106
Number of dentures supplied ... ..		32	34	85	151
6. Anaesthetics.					
General anaesthetics administered by dental officers ... ..					220
7. Inspections.					
(a) First inspection at school. Number of pupils ... ..					82,791
(b) First inspection at clinic. Number of pupils ... ..					6,720
Number of a and b found to require treatment ... ..					41,368
Number of a and b offered treatment ... ..					36,949
(c) Pupils reinspected at school clinic ... ..					4,225
Number of c found to require treatment ... ..					2,714
8. Sessions.					
Sessions devoted to treatment ... ..					9,687
Sessions devoted to inspection ... ..					830
Sessions devoted to dental health education ... ..					212

## Speech Therapy

Clinics.	No. of Sessions held :-		Total	
	Treatment	Consultation	Treatment	Consultation
Addressstone	182	4	186	4
Ash	91	5	96	5
Ashford	20	52	72	57
Barnstead	22	6	28	6
Camberley	18	8	26	8
Caterham Hill	24	18	42	18
Caterham	27	11	38	11
Chertsey	74	130	204	130
Chipstead	42	12	54	12
Cobham	13	3	16	3
Cranleigh	13	3	16	3
Dorking	17	3	20	3
Egham	17	3	20	3
Egham Rythe	17	3	20	3
Epsom	17	3	20	3
Farnham	17	3	20	3
Godalming	17	3	20	3
Guildford	17	3	20	3
Halestone	17	3	20	3
Hersham	17	3	20	3
Horley	17	3	20	3
Leatherhead	17	3	20	3
Lingfield	17	3	20	3
Long Ditton	17	3	20	3
Merton	17	3	20	3
W. Molesey	17	3	20	3
New Haw	17	3	20	3
Oxted	17	3	20	3
Redhill	17	3	20	3
Reigate, Shaws Corner	17	3	20	3
Shepperton	17	3	20	3
Spelthorne	17	3	20	3
Staines	17	3	20	3
Stanwell	17	3	20	3
Sunbury	17	3	20	3
Walton-on-Thames	17	3	20	3
Weybridge	17	3	20	3
Woking (Penlee)	17	3	20	3
Woking	17	3	20	3
Woking House	17	3	20	3
Park School	17	3	20	3
St. Nicholas	17	3	20	3
Templecourt	17	3	20	3
West Hill	17	3	20	3
Total	182	4	186	4

No. of Cases :-	
On Register at beginning of year	31
Added during year	27
Discharged during year	21
Remaining at end of year	37
Under treatment	19
Awaiting admission	18
To be admitted	3

Analysis of Cases :-	
(1) Stammering	2
(2) Defects of articulation :-	47
(a) Dyslalia	12
(b) Rhinolalia	1
(c) Cleft palate	1
(d) Nasal obstruction	1
(e) Chattering	1
(f) Idioglossia	1
(g) Dysarthria	1
(3) Aphasia	1
(4) Defects of voice	1
(5) Defective speech due to :-	1
(a) Amnesia	1
(b) Deafness	1
(6) Retarded speech	1

Analysis of Discharges :-	
Achieved normal speech	10
Were greatly improved	14
Showed some improvement	3
Showed little or no improvement	1

Cases discharged :-	
By clinic	10
Because of non-co-operation of parents	17
Left district	7
Transfer to special schools	1
Other reasons	1



