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West Sussex County Council

ANNUAL REPORT

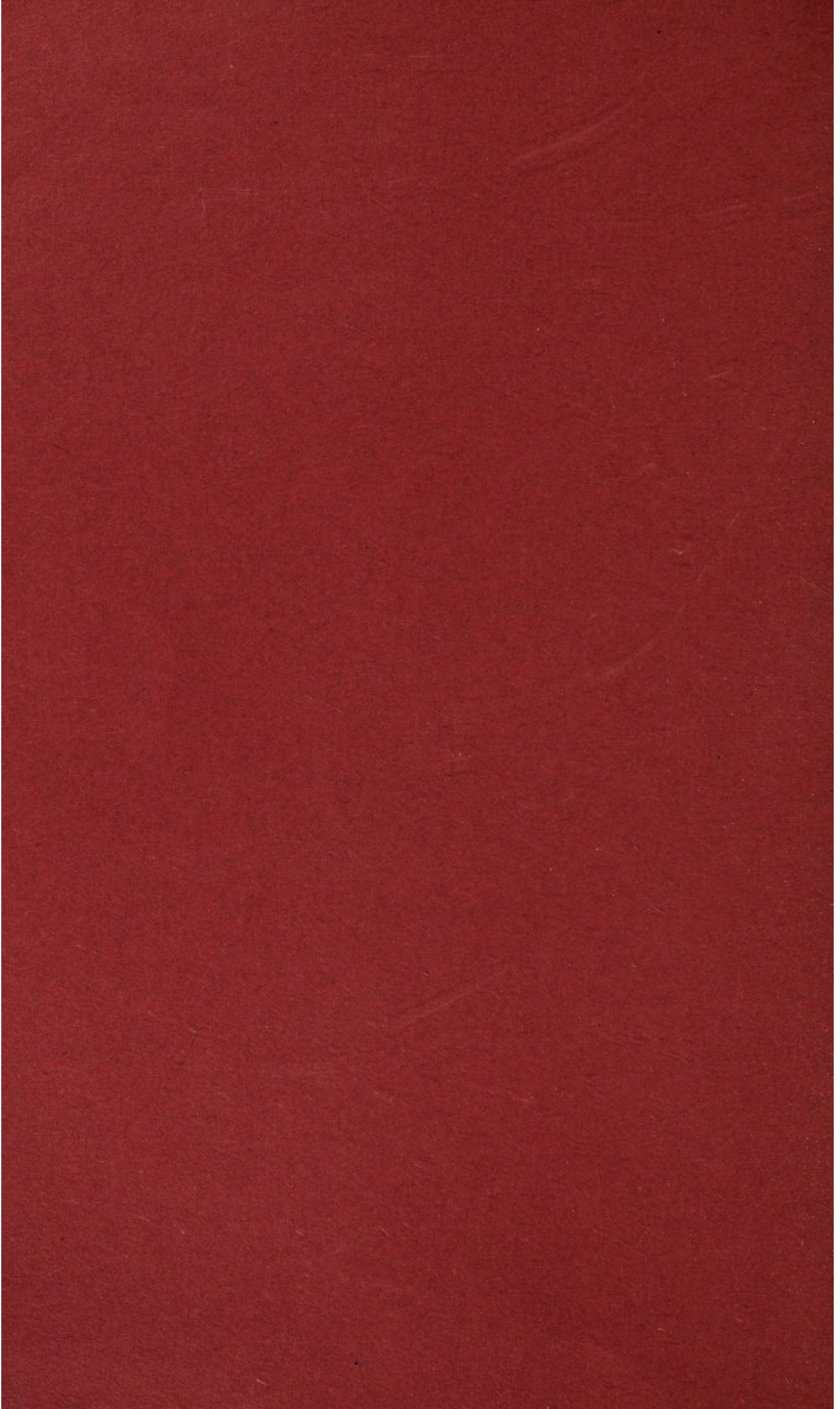
OF THE

COUNTY MEDICAL OFFICER
OF HEALTH

FOR THE YEAR

1950







West Sussex County Council


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WEST SUSSEX COUNTY COUNCIL

Annual Report of the County Medical Officer for the year 1950

FOREWORD

To the Chairman and Members of the Health Committee
of the West Sussex County Council.

I have the honour to present my Annual Report for the year 1950, the production of which has, I regret, been unavoidably delayed.

The report has been drawn up on the same lines as before to facilitate comparison.

In general, it can be said that the services continued to run smoothly, and development on the lines approved has taken place as opportunity occurred. A Care Almoners' Service for patients discharged from hospitals, as well as for invalids generally, was brought into operation at the commencement of 1950, and also a scheme for the teaching of handicrafts to tuberculous patients in their homes. Further information regarding these services, both of which have met a real need, is given later in this report.

It is very satisfactory to record that, for the first time, no case of diphtheria occurred during the year. This is mainly, if not entirely, due to the success of the immunisation scheme, which has been in operation in this County since 1936.

Once again I wish to take the opportunity to record my thanks to the professional and lay staff of my department for their loyal assistance.

J. S. BRADSHAW,
County Medical Officer.

COUNTY HALL,
CHICHESTER.

April, 1952.

STAFF

(a) County Health Department

County Medical Officer and School Medical Officer

J. S. Bradshaw, M.B., Ch.B., D.P.H.

Deputy County Medical Officer and Deputy School Medical Officer

W. Ainslie, L.R.C.P., L.R.C.S., L.R.F.P.S., D.P.H.

Senior Assistant Medical Officer and Supervisor of Midwives

Kathleen E. Stevens, M.B., B.S. (resigned 24.5.50).

Frances Heron Watson, M.B., Ch.B., D.P.H. (appointed 1.6.50).

Assistant County Medical Officers

*H. M. Ayres, M.R.C.S., L.R.C.P., D.T.M. & H., D.P.H.

*K. N. Mawson, M.B., Ch.B., D.P.H.

*V. P. Geoghegan, M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.

Gladys Robinson, M.B., Ch.B.

Christina A. Gunn, M.B., Ch.B., D.P.H.

Barbara M. Towers, B.A., M.R.C.S., L.R.C.P., M.B., Ch.B.

Medical Officer to Worthing Health Sub-Committee

*G. H. Pringle, M.R.C.S., L.R.C.P., D.P.H.

**Also Medical Officers of Health of Local Sanitary Authorities (see page 5).*

Chest Physicians

J. E. Wallace, M.D., Ch.B.

E. W. T. Evans, M.D., Ch.B., D.P.H.

A. M. Read, M.R.C.S., L.R.C.P.

Senior Dental Surgeon

H. D. Hall, L.D.S., R.C.S. (ENG.).

Dental Surgeons

E. S. Brabazon, L.D.S., R.C.S.I.

†J. Hampton, L.D.S., R.C.S. (ENG.).

Mrs. N. M. Kurz, L.D.S., R.C.S. (ENG.).

J. S. Dick, L.D.S., R.C.S. (ENG.).

S. Levy, L.D.S. (Borough of Worthing) (resigned July, 1950).

R. A. Currie, L.D.S., R.C.S. (ENG.).

Mrs. S. McDonald, L.D.S. (resigned 28.2.50).

T. C. Tomlyn, L.D.S., R.C.S. (ENG.).

†S. G. Townley, L.D.S. (resigned 6.4.50).

†L. D. Smith, L.D.S. (appointed 26.9.50).

†Part-time.

County Sanitary Officer

F. W. Mason, F.R. SAN. I., F.S.I.A.

Superintendent Nursing Officer

Miss J. M. Akester, S.R.N., S.C.M., D.N.

Deputy Superintendent Nursing Officer

Miss T. Brown, S.R.N., S.C.M.

Asst. Superintendent Nursing Officers

Miss K. D. Holland, S.R.N., S.C.M. (also Supervisor of Midwives).
Miss G. A. Riches, S.R.N., S.C.M.

Mental Welfare Officers (Mental Deficiency)

Miss C. A. Woolston.
Henry West, S.R.N., R.M.P.A., M.S.S.CH.

Authorised Officers (Lunacy and Mental Treatment)

W. P. Ansell	..	..	Chichester.	N. F. Graville	..	..	Worthing.
G. S. Pople	..	..	Bognor Regis.	H. B. Jervis	..	..	Storrington.
H. Harding	..	..	Littlehampton.	F. Dawton	..	..	County Hall.
			A. Werry	..	..	..	Midhurst.

Chief Clerk

S. Potter.

(b) Medical Officers of Health of Local Sanitary Authorities

G. H. Pringle, M.R.C.S., L.R.C.P., D.P.H.	..	..	Worthing Municipal Borough.
H. M. Ayres, M.R.C.S., L.R.C.P., D.T.M. & H., D.P.H.			Bognor Regis Urban District. City of Chichester.
K. N. Mawson, M.B., Ch.B., D.P.H.	..	..	Horsham Urban District. Horsham Rural District. Petworth Rural District.
V. P. Geoghegan, M.D., Ch.B., M.R.C.S., L.R.C.P., D.P.H.	..	..	Arundel Municipal Borough. Chichester Rural District. Midhurst Rural District.
R. H. Wilshaw, M.D., M.R.C.P., D.P.H. (resigned 30.9.50)			Chancetonbury Rural District. Littlehampton Urban District.
T. H. Harrison, M.R.C.S., L.R.C.P., D.P.H., D.T.M. & H. (appointed 1.10.50)	..	..	Shoreham-by-Sea Urban District. Southwick Urban District. Worthing Rural District.

GENERAL STATISTICS

Area.				Acres.
Urban Districts	..	..	..	24,674
Rural Districts	..	..	..	377,266
Administrative County	..	..	..	<u>401,940</u>

Population (as estimated by the Registrar-General).

Urban Districts	..	..	..	169,540
Rural Districts	..	..	..	146,550
Administrative County	..	..	..	<u>316,090</u>

The estimated population (at mid-Year) in each Sanitary District is shown on page 13.

Census Populations.

		1901	1911	1921	1931
Urban Districts	..	70,223	83,590	90,044	114,800
Rural Districts	..	81,053	92,718	94,830	108,195
Administrative County		<u>151,276</u>	<u>176,308</u>	<u>184,874</u>	<u>222,995</u>

Rateable Value (1st April, 1950) £3,145,014

Product of Penny Rate.

For General County purposes	..	..	..	£12,665
For Special County purposes	..	..	..	£8,588

Rate in the £ Precepted.

					s.	d.
General County purposes	..	..	..	..	11	2
Special County purposes	..	..	..	..		4
					<u>11</u>	<u>6</u>

VITAL STATISTICS

Live Births.

Legitimate	..	3,961	Birth rate per 1,000 of the estimated resident population.
Illegitimate	..	242	
Total	..	4,203	13.30

Still Births.

Legitimate	..	77	Rate per 1,000 total births (live and still).
Illegitimate	..	6	
Total	..	83	19.37

Deaths.

4,454	Death rate per 1,000 of esti- mated resident population.
	14.09

Maternal Deaths.

Puerperal sepsis	—
Other maternal causes	5
	5
Rate	.. 1.2

DEATH rate of Infants under one year of age.

All Infants per 1,000 live births	.. .. .	26
Legitimate Infants per 1,000 legitimate births	.. .. .	27
Illegitimate Infants per 1,000 illegitimate births	.. .. .	11
DEATHS from Cancer (all ages)	.. .. .	766
DEATHS from Measles (all ages)	.. .. .	—
DEATHS from Whooping Cough (all ages)	.. .. .	1
DEATHS from Diarrhoea (under 2 years of age)	.. .. .	9

NOTES ON VITAL STATISTICS

Population.

In estimating the population of the County for mid-1950 at 316,090, the Registrar-General has included, for the first time, non-civilians, and therefore this figure is not comparable with his estimate of population for mid-1949 (312,700), which related to civilians only.

The natural increase of population (excess of births over deaths) was 251, as compared with 321 in 1949.

It is to be noted that the population of the County has more than doubled since the census of 1901, when it was 151,276, the increase being 110 per cent.

The disproportionately large number of aged persons resident in West Sussex was shown in the report of the Registrar General on "Sex and Age Distribution of the Civilian Population at the 31st December, 1947."

This report showed that the percentage population of the County aged 65 years and over was 16.4%, compared with 10.9% for England and Wales. The percentages of the County population in the various age groups were:—

0-5	5-15	15-25	25-35	35-45	45-55	55-65	65-75	75-85	85+
8%	13%	11%	12%	15%	13%	12%	10%	5%	1%
21%		51%				28%			

As well as affecting the birth and death rates, such a high proportion of aged people brings with it other problems in the social welfare field, and accounts in part for the increased demand now being made on the nursing and home help services.

Birth Rate.

In Table I, the birth rates are shown for the last ten years for urban districts, rural districts, and the administrative County, and also those for England and Wales.

The birth rate for the County was 13.3 per thousand population, as compared with 15.8 for England and Wales. This is the lowest rate since 1940, when it was 12.49. The rate is always likely to be lower than that for the Country as a whole, owing to the age constitution of the County population, which is referred to above.

It will be noted that the Registrar-General has resumed his pre-war practice of issuing a comparability factor, based on the age and sex distribution of the population, for adjusting local birth rates (and death rates). When the comparability factor is applied to this County as a whole, the birth rate becomes 14.68 per thousand population (*see pages 11 and 13*).

Death Rate and Causes of Death.

The death rate (Table II) was 14.09 per thousand population, as compared with 13.79 in 1949. When the comparability factor (referred to above) is applied, the rate is reduced to 10.39, which is lower than that for England and Wales (11.6).

It is of interest to note the incidence of death in various age groups, as follows:—

Under 1 year	1—5	5—15	15—45	45—65	65 years and over
2.5%	0.4%	0.5%	4.5%	17.4%	74.7%

Almost 25% of the deaths were due to heart disease—mainly persons over 65 years of age.

Other diseases of the circulatory system accounted for 145 deaths of which 117 occurred in persons over 65 years of age. Bronchitis and pneumonia caused 304 deaths, of which 243 occurred amongst persons over 65 years of age.

Vascular lesions of the nervous system (haemorrhages, thromboses, etc.) caused 634 deaths, of which 539 were in persons over 65 years of age.

Pulmonary tuberculosis was responsible for 81 deaths, 31 (38%) of which occurred in the age group 15-45 years.

Cancer was responsible for 766 deaths (509 being in persons over 65 years of age). The cancer death rate (per 1,000 population) is greater than that for England and Wales, which was 1.99, and this is no doubt due to the high proportion of aged persons in the County. The rate in the County has remained fairly steady for the last ten years, as will be seen by examination of the figures which follow:—

	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Admin. County										
No. of Deaths	616	620	632	619	662	691	673	681	774	766
Death Rate per 1,000 pop.	2.23	2.34	2.47	2.40	2.47	2.38	2.25	2.19	2.38	2.42

Particulars of the sites of the disease and the age distribution of persons who died from cancer during the year will be found in Table III.

With the increased facilities for diagnosis and treatment now available for many types of cancer, the aim of public health propaganda should be to educate people to seek medical advice as soon as suspicious symptoms or signs appear. The mortality rate can be lowered by this means, for the earlier treatment is instituted the more chance there is of complete recovery, and the most promising line of attack is on those conditions which are easily observable by the patient in the early stages—cancer of the breast, the uterus, the skin, the lips and the tongue.

Infantile Mortality.

The infantile mortality rate was 26 as compared with 27 in 1949. During the last 40 years, the reduction effected in the infantile mortality rate is striking, both for the County and for the Country.

	1911	1921	1931	1948	1949	1950
West Sussex ..	85	49	44	23	27	26
England and Wales	130	83	66	34	32	30

Still Births.

The still birth rate of 19.37 was lower than the rate for 1949, which was 21.74. Efforts will be continued by means of the County ante-natal service to reduce this rate, but it is satisfactory to note that there has been a gradual decline in the still birth rate since 1938, when it was as high as 36.8 per 1,000 total births (live and still).

Maternal Mortality.

The maternal mortality rate was 1.2 per 1,000 births (live births and still births) as compared with 1.0 in 1949, the actual number of such deaths being 5 in each year. These figures compare favourably with those for the Country as a whole. With the introduction of the sulphonamide drugs and penicillin, deaths from puerperal sepsis are nowadays extremely rare, and it is towards the reduction of the causes of maternal death attributed to "accidents of childbirth" that our efforts, and those of the practitioner obstetricians and hospitals, with their consultant services, are directed.

TABLE I—BIRTH RATE

Number of Births and Birth Rates for the Years 1941-1950 for Urban and Rural Districts, Administrative County, and England and Wales.

	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Urban Districts										
No. of Births	1,745	2,187	2,256	2,525	2,265	2,758	2,878	2,507	2,293	2,112
Birth Rate	12.84	15.70	16.87	18.52	15.67	17.39	17.59	15.04	13.64	12.46
Rural Districts										
No. of Births	1,849	2,110	2,263	2,383	2,051	2,462	2,602	2,370	2,341	2,091
Birth rate	15.32	16.76	18.51	19.58	16.67	18.80	19.20	16.50	16.19	14.27
Admin. County										
No. of Births	3,594	4,297	4,519	4,908	4,316	5,200	5,480	4,877	4,634	4,203
Birth Rate	14.02	16.20	17.61	19.02	16.13	18.03	18.34	15.72	14.82	13.30
England and Wales										
Birth Rate	14.2	15.8	16.5	17.6	16.1	19.1	20.5	17.9	16.7	15.8

TABLE II—DEATH RATE

Number of Deaths and Death Rates for the Years 1941-1950 for Urban and Rural Districts, Administrative County, and England and Wales.

	1941	1942	1943	1944	1945	1946	1947	1948	1949	1950
Urban Districts										
No. of Deaths	2,255	2,299	2,248	2,241	2,401	2,474	2,486	2,267	2,507	2,622
Death Rate	15.66	16.50	16.80	16.62	16.62	15.60	15.20	13.60	14.91	15.47
Rural Districts										
No. of Deaths	1,703	1,607	1,588	1,626	1,667	1,639	1,651	1,627	1,806	1,832
Death Rate	12.94	12.76	13.05	13.36	13.55	12.52	12.20	11.32	12.49	12.50
Admin. County										
No. of Deaths	3,958	3,906	3,836	3,840	4,068	4,113	4,137	3,894	4,313	4,454
Death Rate	14.36	14.73	15.02	14.88	15.20	14.20	13.80	12.55	13.79	14.09
England and Wales										
Death Rate	12.9	11.6	12.1	11.6	11.4	11.5	12.0	10.8	11.7	11.6

Standardised Rates.

In 1949, the Registrar-General reverted to his pre-war practice of issuing both Crude and Standardised Rates for births and deaths. The Crude Rates (per 1,000 of the population) were based on the actual incidence of the area and took no account of the age and sex distribution of the population. In order that rates can be compared between different places, however, Comparability Factors have been worked out and when these are applied to the crude rates the standardised rates are obtained.

In West Sussex, the Standardised Rates for 1950, were as follows:—

			Birth Rate	Death Rate
Urban Districts	..	..	13.83	10.52
Rural Districts	..	..	15.69	10.25
Admin. County	..	..	14.68	10.39

The crude and standardised rates for each Sanitary District are shown in Table IV (on page 13).

TABLE III

Causes of Death at Different Periods of Life.

Causes of Death	All Ages	Under 1 year	1—5	5—15	15—45	45—65	65 and up
1. Tuberculosis, respiratory ..	81	1	—	—	31	35	14
2. Tuberculosis, other	7	—	—	—	3	2	2
3. Syphilitic diseases	21	1	—	—	—	6	14
4. Diphtheria	—	—	—	—	—	—	—
5. Whooping Cough	1	1	—	—	—	—	—
6. Meningococcal infections ..	2	1	—	1	—	—	—
7. Acute poliomyelitis	7	—	—	3	4	—	—
8. Measles	—	—	—	—	—	—	—
9. Other infective and parasitic diseases	14	1	—	3	3	5	2
10. Malignant neoplasm, stomach ..	105	—	—	—	3	20	82
11. Malignant neoplasm, lung, bronchus	80	—	—	—	8	46	26
12. Malignant neoplasm, breast ..	85	—	—	—	7	29	49
13. Malignant neoplasm, uterus ..	26	—	—	—	1	7	18
14. Other malignant and lymphatic neoplasms ..	470	—	1	2	17	116	334
15. Leukaemia, aleukaemia	14	—	2	—	2	4	6
16. Diabetes	24	—	—	—	1	3	20
17. Vascular lesions of nervous system	634	—	—	—	5	90	539
18. Coronary disease, angina ..	551	—	—	—	7	112	432
19. Hypertension with heart disease	141	—	—	—	1	19	121
20. Other heart disease	947	1	—	—	11	65	870
21. Other circulatory disease ..	145	—	—	—	1	27	117
22. Influenza	38	—	1	1	3	5	28
23. Pneumonia	150	9	2	1	4	20	114
24. Bronchitis	154	1	2	—	2	20	129
25. Other diseases of respiratory system	35	—	2	—	3	10	20
26. Ulcer of stomach and duodenum	53	—	—	—	3	14	36
27. Gastritis, enteritis and diarrhoea	24	9	—	1	3	5	6
28. Nephritis and nephrosis ..	57	—	1	1	4	17	34
29. Hyperplasia of prostate ..	48	—	—	—	—	3	45
30. Pregnancy, childbirth, abortion	5	—	—	—	5	—	—
31. Congenital malformations ..	30	17	3	1	3	2	4
32. Other defined and ill-defined diseases	379	64	5	6	29	67	208
33. Motor vehicle accidents ..	27	1	—	3	11	6	6
34. All other accidents	65	2	—	1	19	6	37
35. Suicide	33	—	—	—	7	13	13
36. Homicide and operations of war	1	—	—	—	—	1	—
ALL CAUSES	4454	109	19	24	201	775	3326

TABLE IV

Chief Vital Statistics for each Sanitary District in the County

	Estimated Population middle of 1950	No. of Births	BIRTH RATES		Illegitimate Births	No. of Deaths	DEATH RATES		Deaths under one year	Infant Mortality Rate per 1,000 Births	Respiratory Tuberculosis Death Rate	Cancer Death Rate
			Crude	Standard- ised			Crude	Standard- ised				
Urban Districts												
Arundel (M.B.)	2,760	37	13.40	15.14	—	41	14.85	10.69	1	27.02	—	2.2
Bognor Regis	25,550	302	11.82	12.77	21	374	14.64	10.83	7	23.17	0.46	2.1
Chichester												
(M.B.) ..	18,230	293	16.07	18.00	19	202	11.08	9.64	5	17.06	0.27	1.4
Horsham ..	17,240	232	13.46	14.26	9	226	13.11	10.62	3	12.97	0.11	1.7
Littlehampton	13,830	224	16.27	17.5	9	165	11.93	10.5	2	8.9	0.2	2.8
Shoreham-by- Sea	12,780	162	12.68	12.8	12	140	10.96	10.1	7	43.2	0.08	2.4
Southwick	10,800	162	15.00	16.1	17	138	12.78	10.5	5	30.9	0.2	2.3
Worthing (M.B.) ..	68,350	700	10.4	12.4	43	1336	19.55	10.9	22	31.4	0.32	3.47
Total Urban Districts ..	169,540	2112	12.46	13.83	130	2622	15.47	10.52	52	24.62	0.23	2.6
Rural Districts												
Chanctonbury	20,350	292	14.35	14.8	13	277	13.61	10.9	2	6.8	0.3	2.6
Chichester ..	42,490	606	14.26	14.8	40	496	11.67	10.96	20	33.0	0.21	2.18
Horsham ..	27,990	450	16.06	16.86	18	295	10.54	9.59	16	35.55	0.14	1.6
Midhurst ..	16,480	225	13.65	15.15	14	217	13.16	10.26	5	22.22	0.30	1.63
Petworth ..	9,640	166	17.01	18.71	8	114	11.82	9.10	—	—	0.41	2.4
Worthing ..	29,600	352	11.89	10.1	19	433	14.68	14.3	14	39.8	0.1	2.7
Total Rural Districts ..	146,550	2091	14.27	15.69	112	1832	12.50	10.25	57	27.25	0.21	2.2
Administrative County ..	316,090	4203	13.30	14.68	242	4454	14.09	10.39	109	25.96	0.25	2.4

INFECTIOUS DISEASES

Table V below shows the incidence of infectious diseases in urban and rural districts during the year.

The number of cases of measles dropped from 3,299 in 1949 to 1,221; whooping cough increased from 471 to 801; and scarlet fever rose from 362 to 462.

Acute poliomyelitis was more prevalent than in the previous year, the number of cases being 58, as compared with 34 in 1949, but in eleven of these cases the disease was of the non-paralytic type, which was not notifiable until the 1st January, 1950.

It is very satisfactory to note that no cases of diphtheria occurred during 1950.

TABLE V
Notifications of Infectious Diseases.

	Urban Districts	Rural Districts	Admin- istrative County
Acute Poliomyelitis and Encephalitis	38	20	58
Meningococcal Infections	3	1	4
Diphtheria	—	—	—
Dysentery	3	15	18
Erysipelas	24	13	37
Measles	576	645	1221
Ophthalmia Neonatorum	1	—	1
Puerperal Pyrexia	47	8	55
Scarlet Fever	219	243	462
Typhoid and Paratyphoid Fever ..	1	1	2
Whooping Cough	468	333	801
Respiratory Tuberculosis	117	66	183
Other forms of Tuberculosis	15	16	31

In Shoreham-by-Sea U.D. Chicken Pox is notifiable and 56 cases were reported during the year.

No cases of Smallpox or Encephalitis Lethargica were reported in the year.

TUBERCULOSIS

The County Council is no longer responsible for the diagnosis and treatment of Tuberculosis, these functions having been transferred to the Regional Hospital Board on 5th July, 1948. The County Council, however, is still responsible for the prevention, care and after-care tuberculosis schemes, and reference is made in the appropriate section of this report (page 29) to the work carried out during the year under review. The chest physicians (formerly tuberculosis officers) assist in this work and thus attempt to secure co-ordination of the County Council's and the Regional Hospital Board's schemes. Thus, the efforts to control the spread of tuberculosis still go on, in spite of this unfortunate dual responsibility. The size of the problem is seen in the Tables which follow, in which details are given of the incidence and mortality of the disease.

The following table shows the number of cases of tuberculosis remaining on the registers of notifications, kept by the District Medical Officers of Health in the County, on the 31st December.

	1949	1950
Respiratory:		
Male	761	739
Female	569	592
Total	1330	1331
Non-respiratory:		
Male	258	179
Female	219	178
Total	477	357
Total number of tuberculous patients on register on 31st December	1807	1688

Notifications of Tuberculosis received in the years 1941-1950.

Year	Population	PRIMARY NOTIFICATIONS			Five Year Average
		Respiratory	Non-Respiratory	Total	
1941	275,700	214	64	278	235
1942	265,200	173	81	254	
1943	255,400	145	90	235	
1944	258,040	162	68	230	
1945	267,510	144	36	180	
1946	289,490	170	50	220	240
1947	298,850	169	38	207	
1948	310,300	219	65	284	
1949	312,700	218	58	276	
1950	316,090	183	31	214	

Notifications of Tuberculosis shown in age-groups for 1950.

AGES	RESPIRATORY			NON-RESPIRATORY		
	Male	Female	Total	Male	Female	Total
0—1	1	2	3	1	1	2
1—2	1	1	2	1	—	1
2—5	—	1	1	—	2	2
5—10	3	2	5	1	1	2
10—15	1	1	2	4	2	6
15—20	3	9	12	—	2	2
20—25	12	16	28	—	5	5
25—35	18	19	37	2	3	5
35—45	14	17	31	1	1	2
45—55	21	9	30	1	1	2
55—65	18	4	22	1	1	2
65—75	9	—	9	—	—	—
75—	1	—	1	—	—	—
Total (all ages)	102	81	183	12	19	31

In addition to the above notifications, 16 cases became known through death returns and posthumous notifications.

**Deaths from Tuberculosis, and Rate per 1,000 population,
in years 1941-1950.**

Year	Population	Respiratory		Non-Respiratory		Total	
		No.	Rate	No.	Rate	No.	Rate
1941	275,700	139	0.50	36	0.13	175	0.63
1942	265,200	110	0.41	24	0.09	134	0.50
1943	255,400	106	0.42	27	0.10	133	0.52
1944	258,040	97	0.37	24	0.09	121	0.46
1945	267,510	107	0.40	21	0.08	128	0.48
1946	289,490	90	0.32	21	0.07	111	0.39
1947	298,850	109	0.36	18	0.06	127	0.42
1948	310,300	104	0.34	12	0.04	116	0.38
1949	312,700	86	0.27	10	0.03	96	0.30
1950	316,090	81	0.26	7	0.02	88	0.28

Deaths from Tuberculosis in 1950, in age-groups.

AGES		Respiratory	Non-respiratory	Total
0—1	..	1	—	1
1—5	..	—	—	—
5—15	..	—	—	—
15—45	..	31	3	34
45—65	..	35	2	37
Over 65	..	14	2	16
TOTAL (all ages)		81	7	88

NATIONAL HEALTH SERVICE ACT, 1946

Section 21. HEALTH CENTRES.

The Minister of Health has not yet enforced this section of the National Health Service Act, which deals with the provision by Local Health Authorities of Health Centres, in which general practitioners and dental practitioners will have facilities provided for examining and treating their patients, alongside clinic facilities provided by the Local Health Authority for child welfare, ante-natal and school medical work. It is understood that the only place in this County which is likely to be approved for the provision of a Health Centre during the next few years is Crawley New Town, where the position is complicated by the fact that it is at present in three Counties—East Sussex, West Sussex and Surrey. The planning of the first Health Centre in Crawley ought to take place fairly soon, but until the boundary question has been settled, and Crawley becomes an entity, such planning will be difficult. At the moment, the site for the first Health Centre is in East Sussex.

Section 22. CARE OF MOTHERS AND YOUNG CHILDREN

The County Council's scheme for providing ante-natal clinics and child welfare centres existed before the National Health Service Act came into force, and has been continued as before. The details of attendances of expectant mothers at ante-natal clinics are shown in the Table which follows:—

Number of Ante-natal Clinics provided at end of year	21
Number of sessions held per month	49
Number of expectant mothers who attended during year	2436
Number of expectant mothers who attended for the First Time during year	1954
Total number of attendances made during year ..	6993

The total number of attendances was 972 less than in the previous year, and no doubt this was due to the fact that there were 431 fewer births than in 1949.

In areas where the population is small, and where the establishment of an ante-natal clinic has not been justified, arrangements have been made for expectant mothers to be seen at the infant welfare centre, either at the beginning or at the end of a session. The work in this connection is shown below:—

Number of expectant mothers seen at Welfare Centres during year	33
Number of expectant mothers who attended for the First Time during year	30
Total number of attendances made during year ..	57

Post-Natal Cases.

No special post-natal clinics have been established, the mothers being seen instead at ante-natal clinics. During the year, 593 women made 672 attendances at such clinics. In addition, 9 women, making 11 attendances, attended at infant welfare centres for post-natal examination.

Medical Staff.

The majority of the County ante-natal and child welfare clinics are staffed by general practitioners, but ten welfare centres and five ante-natal clinics were, at the end of 1950, attended by assistant county medical officers, and five ante-natal clinics were in charge of consultants (women). Cases from the surrounding districts are referred occasionally to the nearest consultant ante-natal clinic.

Child Welfare Centres.

Particulars relating to the child welfare centres in operation during the year are given below:—

Number of Centres provided at end of year	..	37
Number of sessions held per month	.. ..	126
Number of children who First attended during year and on first attendance were—		
(i) Under 1 year of age	.. ..	2,594
(ii) Between ages of 1 and 5 years	..	520
Number of children in attendance at end of year who were then—		
(i) Under 1 year of age	.. ..	2,340
(ii) Between ages of 1 and 5 years	..	5,097
Total number of attendances made by children during year—		
(i) Under 1 year of age	.. ..	35,947
(ii) Between ages of 1 and 5 years	..	23,165

The number of children under one year of age, who attended for the first time during the year, represented 61 per cent of the total (live) births, as compared with 62 per cent in 1949.

Weighing Centres.

In certain districts where the establishment of a child welfare centre has not been justified, or is doubtful, weighing centres have been set up. These provide facilities for mothers to attend with their children, up to the age of five, to have them weighed and for the health visitor to examine them and give the mothers any necessary advice. Details of the centres provided at the end of the year under review are given below:

Number of Centres provided at end of year	.. ..	16
Number of sessions held per month	.. ..	24
Total number of attendances made by children during year—		
(i) Under 1 year of age	.. ..	1,760
(ii) Between ages 1 and 5 years	.. ..	2,118

Welfare Foods and Medicaments.

Supplies of National Dried Milk and of Orange Juice and Cod Liver Oil are available at centres established by the Ministry of Food. In the rural areas these centres are usually at the County child welfare centres.

A variety of proprietary brands of welfare foods are available at all child welfare centres, on the recommendation of the Medical Officer, at cost price.

Supplies of certain medicaments are also available at centres for issue free of charge to expectant and nursing mothers, on the recommendation of the doctor.

Relaxation Classes for Expectant Mothers.

Relaxation classes for expectant mothers were in operation throughout the year at five centres, as follows:—

Area	Date of Establishment	Sessions held	Total Number of Attendances
Bognor Regis	9/6/49	Weekly	161
Chichester	18/3/48	Weekly	309
Horsham	1/12/49	Weekly	524
Littlehampton	8/6/49	Weekly	210
Worthing	11/11/49	Weekly	90

Provision of Maternity Outfits.

1445

1,205 Maternity Outfits were supplied free of charge to mothers having their confinements at home.

Contraceptive Clinics.

Cases are referred to contraceptive clinics at Bognor Regis, Shoreham-by-Sea, Brighton, and Portsmouth. The number of those attending the various clinics is shown below:—

Clinic	No. who attended for First Time	Total No. of attendances
*Bognor Regis.. ..	227	520
Shoreham-by-Sea	69	141
Brighton	5	5
Portsmouth	4	4
Totals	305	670

*Organised by Family Planning Association.

Care of Premature Infants.

No matter what the period of pregnancy, all babies weighing $5\frac{1}{2}$ lbs. at birth, or less, are regarded as premature infants for the purpose of the statistics given below. An investigation is being carried out into the progress of premature babies by the Joint Committee of the Royal College of Obstetricians and Gynaecologists and the Population Investigation Committee. The results of this investigation will, it is hoped, throw fresh light on the problems of prematurity.

Special equipment has been provided by the County Council for premature infants who are nursed at home—draught-proof cots and bedding, and means of keeping the baby warm, etc. This equipment is stored at the St. John Ambulance Depots in Chichester and Horsham, and is at the disposal of midwives and doctors.

	1949	1950
1. Number of premature babies born at home during year	82	82
Number of these:		
(a) Transferred to hospital	1	8
(b) Died at home during first 24 hours	8	2
(c) Died between 2nd and 28th day	3	2
(d) Survived at end of one month ..	70	70
2. Number of premature babies born in Hospital or Nursing Homes	161	148
Number of these:		
(a) Died during first 24 hours ..	13	8
(b) Died between 2nd and 28th day	7	5
(c) Survived at end of one month ..	141	135

Care of Unmarried Mothers and their Children.

The County Council have made arrangements with the Chichester Diocesan Moral Welfare Association and St. Monica's Welfare Centre, Worthing (affiliated to Chichester Diocesan Moral Welfare Association) to care for unmarried mothers and their children. During the year seven cases were admitted to the Bell Hostel at Eastbourne and fourteen cases to other residential homes.

Dental Care.

The following Report has been prepared by the Senior Dental Officer.

"During this year the dental staff reached its lowest ebb, for two full-time dental officers and one part-time dental officer resigned. In these reduced circumstances it will be appreciated that considerable difficulties were experienced in meeting all the demands for our services.

A perusal of the statistical tables will reveal some interesting facts. The number of mothers treated shows another small decline but the number of infants remains constant. This indicates that the adults are taking advantage of the free facilities available from private dentists while it is to the clinics that the toddlers are brought. The number of extractions for the mothers shows a big drop as does also the number of artificial dentures supplied. On the other hand, the number of scalings and gum treatments have increased considerably. These figures confirm the fact that the character of the treatment found necessary is definitely changing, for the standard of dental health among the women is higher. The filthy and neglected mouth, once so common at our clinics, is becoming more and more rare. The young mothers show an increasing pride and interest in their teeth and are anxious to preserve them. Most are ex-patients of the school dental service and it is gratifying to find the care and teaching given in their childhood is definitely bearing fruit. These are ends to which school dentists have been working for many years. Public opinion with regard to dental health is extremely slow to move, but these are indications that the pioneer work of the past is bringing its results and are proofs that an efficient and enthusiastic school dental service is the foundation of our goal—a dentally fit Britain.

Our dental service for mothers and infants is as comprehensive as we can make it at present. Our scheme provides that the name of every expectant or nursing mother, or child under school age, who comes to the notice of the Health Centre staffs is referred to the dental officer in the particular area, who sends a carefully worded letter explaining the desirability of a healthy mouth and offering an appointment for an examination and treatment if necessary. Those who do not take advantage of this offer, it is hoped will in any case be encouraged to seek help through the General Dental Service. During the year 519 mothers and 362 infants were examined. Of these 468 and 258 respectively were treated. These figures will show that the scheme is in active operation and contributes its quota to the health of the public."

The following tables show the numbers provided with dental care, and the form of treatment given.

(a) Numbers provided with dental care.

	Examined	Needing treatment	Treated	Made dentally fit
Expectant and Nursing Mothers	519	485	468	368
Children under five ..	362	320	298	258

(b) Forms of dental treatment provided.

	Extractions	Anaesthetics		Fillings	Scalings or Scaling and gum treatment	Silver Nitrate treatment	Dressings	Radiographs	Dentures provided		Dentures repaired
		Local	General						Complete	Partial	
Expectant & Nursing Mothers	691	185	105	705	245	6	77	13	64	78	7
Children under five	379	58	136	160	4	44	45	5	—	—	—

Facilities for X-rays are available at the Horsham Hospital and St. Richard's Hospital, Chichester, and by arrangement with private dental practitioners in the Bognor Regis, Littlehampton and Shoreham-by-Sea areas. Dentures are provided as and when necessary and are obtained from commercial laboratories in Cardiff and Bognor Regis.

Nurseries and Child Minders Regulation Act, 1948.

This Act provides for the registration and inspection of:—

- (a) premises other than premises wholly or mainly used as private dwellings, where children are received to be looked after by the day or for any longer period not exceeding six days ;
- (b) persons who for reward receive into their homes children under the age of five to be looked after as aforesaid.

The following statement gives particulars of registrations at the end of the year.

	Number registered.	Number of children provided for.
(a) Premises	5	55
(b) Daily Minders	—	—

Section 23. MIDWIVES SERVICE.

A domiciliary midwifery service is provided by the County Council, and the services of a County midwife are available for every woman during her ante-natal period, confinement and post-natal period. Under the National Health Service Act, the expectant mother may also engage a general practitioner to give her a specified number of ante-natal examinations, to attend at her confinement, if he thinks it neces-

sary, and to carry out a post-natal examination following the confinement. The services of hospital consultant obstetricians are also at the practitioner's disposal, and beds are available in hospitals and maternity homes provided by the Regional Hospital Board, when required on account of obstetric abnormality, or of unsuitable home conditions. It will thus be seen that three Authorities may be concerned with a confinement case—the Executive Council providing the services of the general practitioner, the Local Health Authority providing the domiciliary midwifery and ante-natal clinics, and the Regional Hospital Board being responsible for the provision of maternity homes and hospitals, and the services of consultants. Such a division of responsibilities cannot make for a well co-ordinated scheme.

The work carried out by the County midwives is shown in the following Statement, which also includes particulars of the work carried out by midwives in private practice.

1. Number of Midwives practising on 31st December.	1949	1950
(a) Employed by County Council	78	77
(b) In Private Practice—		
(i) Domiciliary	20	15
(ii) In Nursing Homes	22	18
(c) Employed by Hospital Management Committees	44	47
	<hr/> 164	<hr/> 157

2. Number of Confinements attended by Midwives.

	1949		1950	
	As Midwives	As Maternity Nurses	As Midwives	As Maternity Nurses
(a) Midwives employed by the County Council	1,355	563	1,315	381
	<hr/> 1,918		<hr/> 1,696	
(b) Midwives in Private Practice—				
(i) Domiciliary	10	34	7	21
	<hr/> 44		<hr/> 28	
(ii) In Nursing Homes	160	440	108	239
	<hr/> 600		<hr/> 347	

Gas and Air Analgesia.

Since January, 1946, a midwife's training has included training in the administration of gas and air analgesia, and in course of time all midwives will have received this instruction. The position in this County is shown below. During 1950, four County midwives were sent for the necessary training in the use of the apparatus. Of 1,724 births taking place at home, 1,063 mothers received gas and air analgesia.

Number of midwives practising in the County at the end of the year qualified to administer gas and air analgesia.

(i) Midwives employed by the Authority	68
(ii) Midwives in private practice (including midwives in Nursing Homes)	5
(iii) Midwives employed by Hospital Management Committees	42

Number of cases in which gas and air was administered during year by domiciliary midwives employed by the Authority.

(a) As midwife	832	} 1,063
(b) As maternity nurse	231	

Housing of Midwives.

Unfortunately, it was not possible, for various reasons, for the erection of houses for midwives and other nurses at Bognor Regis and Yapton, referred to in the Annual Report for 1949, to be started in 1950, as anticipated, and consequently the five years building programme will be considerably delayed.

Certain improvements were, however, carried out on existing accommodation, including the provision of garages at Sidlesham and Slinfold, and a garage and District Room at Stedham.

Post-Graduate Courses.

Ten midwives attended Refresher Courses during the year. In March, 1950, a County refresher course (five days) was again organised at Lodge Hill Residential Centre.

MIDWIVES ACTS, 1902-1950

Summoning of Medical Aid in Emergency.

Although every expectant mother is now able to obtain the services of a doctor for her pregnancy, confinement and after-care, midwives are still required by the rules of the Central Midwives Board to summon medical aid in an emergency, even though the doctor has been booked for the confinement. The midwife is also required to send the Local Supervising Authority (the County Council) a copy of the Medical Aid form which she sends to the practitioner, and in cases where a doctor has not been booked by the mother, the County Council is required to pay specified fees under the Midwives Act, 1918.

The following statement shows the number of occasions on which medical aid was sought:—

(a) For Domiciliary Cases.					
(i)	Where the medical practitioner had arranged to provide the patient with maternity medical services under the N.H.S. Act, 1946	..	..	..	306
(ii)	Others	..	..	..	140
					<hr/> 446
(b)	For cases in Institutions and Nursing Homes	..	..		342
Total					<hr/> 788 <hr/>

Supervision.

Under these Acts the County Council has the duty of supervising all midwives practising in the County, and of ensuring that the rules laid down by the Central Midwives Board are carried out. This supervisory work is carried out by the Senior Assistant Medical Officer for Maternity and Child Welfare, assisted by a lay Supervisor of Midwives, who also acts as Assistant Superintendent Nursing Officer.

Section 24. HEALTH VISITING

Whole-time health visitors are employed in the urbanised areas of the County. In the rural areas, with a few exceptions, health visiting is combined with general nursing and midwifery. Details of the work carried out during the year under review are given below. The essential field worker in preventive social medicine—in the home and the child welfare centre—is the health visitor and, with the increase in the scope of her work envisaged in the National Health Service Act, she plays an increasingly important part in health education, and consequently in the prevention of illness and the spread of disease. As part of such work the health visitor has regard to the background and environment of the family and of its likely effect on the child, as well as its actual effect, physical and mental. As she also undertakes the duties of a school nurse, she is in close touch with the child from birth until he leaves school.

Tuberculosis health visiting is also an important part of the health visitor's work.

1. Number of health visitors employed at end of year—

(a)	Whole-time	..	..	..	28
(b)	Combined duties (health visiting, general nursing and midwifery)	..	..		49

2. Number of visits by health visitors during year—

(a) Ante-natal visits	.. .. .	602
(b) Visits to Infants under 1 year	..	36,822
(c) Visits to children 1 to 5 years	.. ..	40,035
(d) Visits to other cases	.. .. .	24,640

It should be pointed out that figures relating to School Nursing duties, are not included in the above table.

Post-Graduate Courses.

During the year twelve health visitors attended post-graduate courses under the County scheme. In March, 1950, a County refresher course (five days) was again organised at Lodge Hill Residential Centre.

Training Courses.

Arrangements were made for two nurses to take the Health Visitors' Training Course during the year.

Section 25. HOME NURSING

The following statement shows the staff of general nurses employed on Home Nursing at the end of the year, and summarises the work done during the year.

Number of Nurses employed at end of year—

Whole-time	.. .. .	35	(33)
Part-time	.. .. .	2	(4)
Combined duties (health visiting, general nursing and midwifery)	.. .. .	59	(60)
Number of cases attended	.. .. .	12,439	(12,650)
Number of visits made	.. .. .	189,183	(177,712)

The corresponding figures for 1949 are shown in brackets.

Housing.

Reference has been made in the section dealing with midwives to the provision of houses in certain areas. The same remarks apply to the housing of general nurses.

Training for Queen's Roll.

Arrangements were made during the year for three nurses to receive Queen's training in district nursing.

Post-Graduate Courses.

During the year two nurses attended post-graduate courses under the County Scheme. In March, 1950, a County refresher course (five days) was again organised at Lodge Hill Residential Centre.

Section 26. VACCINATION AND IMMUNISATION.

(a) VACCINATION.

Vaccinations are carried out by general practitioners under the terms of their contract with the Executive Council, and a fee is payable by the County Council for the record of the vaccination.

The number of such records received in respect of vaccinations, and re-vaccinations, carried out in 1950 is given below:—

	Age at 31st December				
	Under 1	1—4	5—14	15 or over	Total
Number vaccinated	1,344	415	179	181	2,119
Number re-vaccinated	29	57	163	728	977

The totals for 1949, were primary vaccinations 1,467, and re-vaccinations 488.

(b) DIPHTHERIA IMMUNISATION

The number of children who completed a course of immunisation in the year 1950 was 4,518, including 3,897 under school age. In addition, 2,154 children received reinforcing injections.

The Table below shows the position as at 31st December, 1950, with regard to the protection of the child population of the County.

	Age							
	Under 1	1	2	3	4	5—9	10—14	Total under 15
Number protected	103	2,443	3,080	3,271	2,612	14,432	18,185	44,126
Estimated Mid-year child population 1950	Children under five 24,030					Children 5—14 43,200		67,230

It will be noted that out of a child population computed to be 67,230, 44,126 (66%) had been protected by immunisation by the end of the year. Although the number of protected children under five years of age increased from 42% in 1949, to 48% in 1950, this cannot be regarded as entirely satisfactory and every effort will continue to be made to increase this percentage.

As stated earlier in this Report, no cases of diphtheria occurred in the County in 1950.

Section 27. AMBULANCE AND HOSPITAL CAR SERVICE

Section 27 of the National Health Service Act places on the County Council the responsibility of providing, where necessary, and free of cost to the patient, an Ambulance and Hospital Car Service "for the conveyance of persons suffering from illness, or mental defectiveness, of expectant and nursing mothers, from places in their area to places in or outside their area."

(a) AMBULANCE SERVICE

In West Sussex the duty has been delegated to the St. John Ambulance Brigade, except in Midhurst where the British Red Cross Society is continuing to serve the area.

The following Table shows the distribution of ambulances and the mileage undertaken.

Station	No. of Ambulances	No. of patients carried				Mileage
		Accident and other emergencies	Invalids	Infectious cases	Total	
St. John Ambulance Brigade						
Bognor Regis ..	4	230	1,255	9	1,494	29,502
Chichester	4	132	2,228	98	2,458	50,246
Crawley	1	71	520	—	591	16,654
Henfield	1	41	133	—	174	5,240
Horsham	4	119	974	62	1,155	42,447
Littlehampton ..	1	114	855	—	969	22,095
Petworth	1	60	464	—	524	15,768
Pulborough	1	32	422	—	454	17,512
Southwick	2	141	1,381	—	1,522	27,491
Steyning	1	10	176	—	186	5,231
Worthing	4	397	4,095	241	4,733	58,706
British Red Cross Society						
Midhurst	1	77	361	—	438	12,210
Totals ..	25*	1,424	12,864	410	14,698	303,102

*Also one ambulance based on the St. John Ambulance Brigade Headquarters.

The average mileage covered by the Ambulance Service per month was 25,258 miles, as compared with 22,492 per month in 1949.

Where it is necessary for a patient to make a long journey and he can without detriment to his health most conveniently be conveyed by rail, as a stretcher or semi-ambulant case, special arrangements are made with the Railway Authorities, and with the appropriate Local Health Authority at the point of detraining, for the provision of an ambulance to undertake the last stage of the journey.

(b) HOSPITAL CAR SERVICE

The St. John Ambulance Brigade, acting for the County Council, covers the whole County, with Transport Officers based on Bognor Regis, Chichester, Horsham, Littlehampton and Worthing, using the services of voluntary car drivers and their cars.

The demands made on this service continued to increase, the average monthly mileage during 1950, being 61,560, as compared with 48,380 in 1949. Efforts to prevent abuse of the service were continued.

The following statement shows the monthly mileage and the number of patients carried in 1950:—

Month	Mileage	No. of Patients carried
January	56,518	2,771
February	56,086	2,775
March	63,271	2,815
April	54,136	2,505
May	64,921	2,930
June	64,104	3,130
July	66,092	2,945
August	61,064	2,483
September	61,669	2,793
October	65,294	3,143
November	71,468	3,264
December	54,094	2,531
Totals	738,717	34,085

Section 28. PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Tuberculosis.

The Chest Physicians on the staff of the Regional Hospital Board carry out for the County Council the prevention, care and after-care Tuberculosis Scheme, assisted by the health visitors, who act as tuberculosis visitors in their various districts. In the Chest Clinic areas the health visitor attends and assists in the running of the Clinic. Two care almoners also assist in this work—*see below*.

A part-time Occupational Therapist was appointed on 30th January, 1950, for the purpose of teaching suitable handicrafts to patients on discharge from sanatoria, and also to tuberculous patients who were being treated at home, under the supervision of the Chest Physicians. This appointment was in the nature of an experiment and was limited in the first place to patients residing in the southern half of the County. In view, however, of the success of the scheme, the appointment was made a whole-time one, as from 18th December, 1950, in order that the service might be extended to patients in the remainder of the County. The number of patients who received instruction from the Occupational Therapist during the year was 64, and the handicrafts taught included leatherwork, tapestry, plastics, weaving, embroidery, needlework, knitting, etc.

Thirty revolving shelters were supplied free on loan during 1950, to patients recommended by the Chest Physicians.

Subject to a means test, free milk is supplied by the County Council, on the recommendation of the Chest Physicians, to patients suffering from respiratory tuberculosis, who are not eligible for National Assistance. During the year, 21 patients received this assistance. Patients who receive assistance from the National Assistance Board, and who were "gainfully occupied" before receiving treatment, are entitled to a higher rate of allowance to cover the cost of extra nourishment, such as milk.

Certain of the County Council's duties with regard to tuberculosis care and after-care have been delegated to the Sussex Rural Community Council, who give help of various kinds—supplying bedding, clothes, etc.—to patients referred to them by the Chest Physicians. Committees have been set up by the Rural Community Council at Chichester, Horsham and Worthing. During 1950, 159 patients were given assistance.

B.C.G. Vaccination.

As mentioned in the 1949 Report, the scheme made by the County Council under Section 28 has been extended to provide B.C.G. (*Bacillus Calmette-Guerin*) vaccination for children of tuberculous parents, to protect them against infection, these inoculations being carried out by the Chest Physicians. During the testing period, and for a period after the inoculation, such children have to be isolated from the source of infection—about 12 weeks in all—and in some cases this may necessitate the provision by the County Council of foster-home accommodation.

As supplies of vaccine were not available until late in 1950, only 19 children had been vaccinated by the end of the year, and it was not necessary for any of these cases to be boarded-out by the County Council.

Mass Radiography.

A Mobile X-ray Unit, based on Portsmouth, visited the Horsham and Billingshurst areas during the year. Altogether, 4,362 persons were examined, of whom five were referred for further advice as suspected cases of active pulmonary tuberculosis.

These Mobile Units are maintained by the Regional Hospital Board and this County is also to be served by Units based in East Sussex and Surrey.

Rehabilitation of Tuberculous Persons.

On the recommendation of the Chest Physicians, patients suitable for industrial rehabilitation are sent to special Training Colonies, where they can work under medical supervision, with a view to their employment in the Colony workshops, or elsewhere.

Care Almoners.

Two Care Almoners, one based on Chichester and the other on Worthing, commenced work in January, 1950, to follow up patients discharged from hospitals and to carry out social welfare work amongst invalids generally, including tuberculous patients. The Care Almoner centred on Chichester also acts as Almoner at Aldingbourne Sanatorium and its Annexe at Bognor Regis, by arrangements made between the County Council and the Chichester Group Hospital Management Committee.

Patients are referred to the Care Almoners by the Chest Physicians, Almoners of local hospitals, General Practitioners, etc., and the number of cases brought to their notice during the year was 483, including 284 tuberculous cases.

The main function of the Care Almoners is to advise and assist patients in carrying out the doctors' recommendations for after care, as far as possible, and in this connection they work in close contact with the National Assistance Board on financial matters, with the Ministry of Labour on questions of training and employment, and with the Sussex Rural Community Council for any other assistance required by tuberculous cases.

Provision of Nursing Equipment.

The scheme has been continued, whereby articles required by patients being nursed in their own homes are supplied on loan from depots established by District Nursing Associations, the St. John Ambulance Brigade and the British Red Cross Society.

Prevention of Illness—Education of the Public.

The programme of the Central Council for Health Education, to whom this work has been delegated, has been continued, its aim being to give the man and woman in the street appropriate information concerning individual community health. The Central Council has also organised Courses for health educators—doctors, nurses, teachers, etc.

The work of health visitors in the preventive and educational field is referred to under "Health Visiting"—Section 24.

Section 29. HOME HELP SERVICE.

This service, which is a valuable ancillary to the nursing, welfare and hospital services, is organised on behalf of the County Council by the Women's Voluntary Service, except in Worthing, where the scheme is administered by the Medical Officer to the Worthing Health Sub-Committee, with the assistance of an Organiser.

The County Organiser, appointed by the W.V.S., was assisted during the year under review by eight W.V.S. Area Organisers, based on Bognor Regis, Chichester, Crawley, Horsham, Lancing, Littlehampton, Selsey and Storrington.

The number of cases assisted was 1,471 (maternity 298; tuberculosis 36; general 1,137), as compared with 1,241 in 1949, and, as in previous years, the services of the Home Helps were restricted to essential domestic duties.

The staff employed at the end of the year consisted of 7 whole-time and 176 part-time Home Helps.

Section 51. MENTAL HEALTH SERVICE.

The functions devolving on the County Council under the National Health Service Act include the responsibility for initial proceedings for removal of patients to hospital under the Lunacy and Mental Treatment Acts (formerly undertaken by Relieving Officers); for the ascertainment of, and (where necessary) removal to institutions of mental defectives, or for their care within the community by means of guardianship; for the training and supervision of defectives in their own homes; and for the provision of training centres and occupation centres for mental defectives.

Constitution and Meetings of Mental Health Sub-Committee.

The Mental Health Sub-Committee consists of nine members of the County Health Committee, plus the Chairman and Vice-Chairman (*ex officio*) and a representative nominated by the Brighton Guardianship Society. Meetings are normally held at the beginning of each quarter and all matters relating to Mental Health are referred to the Sub-Committee.

Administration.

The County Medical Officer is responsible for the organisation and control of the Mental Health Service, and the Deputy County Medical Officer assumes responsibility for the medical direction of the Service.

Staff.

The Deputy County Medical Officer and all Assistant County Medical Officers carry out certification work.

Care and After-care.

There are two Mental Welfare Officers employed whole-time on duties in connection with mental deficiency (*e.g.* visitation of defectives under voluntary or statutory supervision, under guardianship or on licence from institutions). One Officer is based at Chichester and the other at Worthing.

Arrangements for initial proceedings and removal to Mental Hospital under the Lunacy and Mental Treatment Acts are undertaken by seven Duly Authorised Officers, giving part-time service.

Co-ordination with the Regional Hospital Board and Hospital Management Committees.

(i) Mental Illness.

Co-ordination is maintained with the hospital and specialist services of Graylingwell Hospital. Out-patient Psychiatric Clinics are held at the Worthing, Horsham and Royal West Sussex (Chichester) Hospitals by the staff of the Mental Hospital.

Regular weekly visits have been paid by a Psychiatrist to North View at East Preston and Budgenor Lodge at Midhurst (former Public Assistance Institutions now being used as Welfare Homes for aged and handicapped persons). In addition to giving advice and guidance on the care, management and occupation of those resident—principally senile patients—special examinations were made of 119 persons at North View and 86 at Budgenor Lodge, Bury House and Stopham House.

The psychiatric social workers on the staff of Graylingwell Hospital carry out after-care work by visiting homes and advising on domestic problems, etc. They also supervise patients—if any—on trial or licence from the Mental Hospital.

At Chichester the Deputy Superintendent of the Mental Hospital organised an Out-patient Social Club of about 20—25 members, which meets in the County Health Centre.

(ii) *Mental Deficiency.*

The arrangements for the admission of defectives to institutions maintained by the Regional Hospital Board continued throughout the year.

The bulk of patients were admitted to either the Royal Earlswood Institution, Redhill, or its ancillary premises at the Forest Hospital, Horsham. An alteration in the Catchment Scheme at the beginning of the year restricted vacancies to The Manor, Epsom, to pregnant girls where more adequate facilities existed for such cases. In addition, one high grade girl, over the age of 16 years, was admitted to St. Mary's Home, Alton, by arrangement with the Consultant Psychiatrist of the Regional Hospital Board serving the area in which the Convent was situated.

The Medical Superintendent of the Royal Earlswood Institution has given much help and guidance in this matter and the problem of institutional care is not now so acute as hitherto.

Duties delegated to Voluntary Associations.

The Brighton Guardianship Society continues to find homes for the bulk of defectives in need of guardianship, and they supervise those that they place. They maintain Occupation Centres which are attended by defectives placed in Brighton.

Work undertaken by the Mental Health Service.

(i) *Lunacy and Mental Treatment.*

During the year Authorised Officers arranged for the admission of the following number of patients to Graylingwell Hospital:—

	M.	F.	T.
Urgency Order	31	73	104
Summary Reception Order ..	19	41	60
Voluntary Patient.. .. .	9	27	36
Totals	59	141	200

The number of admissions to Graylingwell Hospital in 1950, as shown in the Annual Report of the Medical Superintendent, were:—

	M.	F.	T.
Voluntary	207	369	576
Temporary	—	—	—
Certified	44	108	152
Totals	251	477	728

Of the certified patients received 102 were admitted under Urgency Orders.

Of the total direct admissions 75.1% were voluntary patients.

The average age on admission was 47.4 and 137 (18.2%) of those admitted were aged 65 years or over.

(ii) *Mental Deficiency.*

The total number of defectives under care on 31st December is shown below:—

	M.	F.	C.	T.
In Institutions and Approved Homes	108	101	54	263
Under Guardianship	23	46	13	82
In "place of safety"	—	2	4	6
Under Statutory Supervision	91	99	86	276
Under Voluntary Supervision	93	67	4	164
Totals	315	315	161	791

The following Table shows the number of defectives under institutional care on 31st December:—

Institution	M.	F.	T.
Royal Earlswood Institution, Redhill ..	73	43	116
Forest Hospital, Horsham (former P.A. Institution)			
The Manor, Epsom	15	12	27
St. Teresa's, Farnham	—	12	12
Botleys Park, Chertsey	2	1	3
Farmfield, Horley	3	—	3
Laughton Lodge, Lewes	24	21	45
Stoke Park, Bristol	4	9	13
Other Institutions	15	14	29
Approved Homes	7	3	10
Coldeast Colony, Southampton	1	—	1
St. Mary's Home, Alton	—	4	4
Totals	145	119	263

The number of Defectives admitted to Institutions during the year was as follows:—

M.	F.	T.
14	16	30

The number of defectives ascertained during the year was as follows:—

	M.	F.	T.
(a) Cases reported by Local Education Authorities (Section 57, Education Act, 1944):—			
(i) Under Section 57 (3)	6	8	14
(ii) Under Section 57 (5)	28	12	40
(b) Other cases reported and ascertained to be "subject to be dealt with"	10	27	37
Total cases ascertained to be "subject to be dealt with"	44	47	91
(c) Other cases reported who are not at present "subject to be dealt with" but for whom the Local Health Authority may subsequently become liable	46	34	80
Total number of cases reported during the year ..	90	81	171

The following Table shows the disposal of cases reported during the year:—

	M.	F.	T.
(a) Cases ascertained to be "subject to be dealt with"			
(i) Admitted to Institutions (by order) ..	1	7	8
(ii) Placed under Guardianship (by order) ..	—	2	2
(iii) Taken to place of safety	—	5	5
(iv) Placed under Statutory Supervision	41	29	70
(v) Died or removed from area	1	1	2
(vi) Action not yet taken	1	3	4
(b) Cases not at present "subject to be dealt with"			
(i) Placed under Voluntary Supervision ..	43	32	75
(ii) Found not to be defective	2	2	4
(iii) Died or removed from area	1	1	2
(iv) Action not yet taken	1	3	4
(v) Action unnecessary	1	—	1
Totals	90	81	171

Guardianship.

Two defectives were placed under guardianship during the year. At the end of the year there were 82 cases under guardianship, of which 61 were under the care of nominees of the Brighton Guardianship Society and were supervised by that Society on behalf of the Local Authority. Six other defectives were under the guardianship of their parents or relatives and received a weekly allowance from the Local Authority or National Assistance Board towards the cost of their maintenance. The remaining 15 defectives were with other guardians in the community.

Of the 82 cases under guardianship at the end of the year, 7 (4 females and 3 males) were wholly self-supporting and 6 partially self-supporting.

Occupation Centres.

(a) Worthing Occupation Centre.

A non-resident Occupation Centre is housed in the same building as the Home for the Blind at Worthing, and caters for defectives from that district and surrounding areas. A coach transports defectives to the Centre from places between Littlehampton and Southwick. A qualified Supervisor and an unqualified assistant are employed to train the defectives who are mainly of compulsory school age. At the end of the year 21 children were on the register.

A proposal to extend the Worthing Home for the Blind by providing alternative accommodation for the Occupation Centre had been approved by the Minister and at the end of the year he had given formal approval for the construction of a new Occupation Centre at Brougham Road, Worthing, which, it was anticipated, would be completed by about the middle of 1952.

(b) Brighton Guardianship Society.

At the end of the year there were 18 cases under the care of the Brighton Guardianship Society in attendance at Occupation Centres maintained by that Society.

REGISTRATION OF NURSING HOMES

The Public Health Act, 1936 (Sections 187-194) provides for the registration of Nursing Homes and the inspection of them by the County Council.

Three applications for registration were received during the year, and in every instance registration was granted.

At the end of the year, there were 64 Nursing Homes (as compared with 69 in 1949) with accommodation as follows:—

Beds for Maternity cases	Beds for Other cases	Total
40	624	664

No Orders were made refusing or cancelling Registration and no Applications for Exemption were received.

These Homes are inspected periodically by the Senior Assistant Medical Officer.

MILK

MILK (SPECIAL DESIGNATION) (PASTEURISED AND STERILISED MILK) REGULATIONS, 1949 and 1950

During the year four new pasteurising plants were licensed, and at the 31st December, 1950 there were eleven licensed pasteurising plants in the County, excluding the Borough of Worthing, situated as follows:—

Bognor Regis Urban District	..	..	..	..	1
Chichester City	..	..	..	..	1
Chichester Rural District (Westergate)	..	..	..	..	1
Horsham Urban District	..	..	..	..	1
Horsham Rural District (Five Oaks)	..	..	..	..	1
Littlehampton Urban District	..	..	..	..	3
Midhurst Rural District (Kingsley Green)	..	..	..	..	1
Petworth Rural District (Wisborough Green)	..	..	..	..	1
Southwick Urban District	..	..	..	..	1

A satisfactory standard has been maintained in all the licensed dairies.

Samples procured for bacteriological examination during 1950 were examined until 1st November, 1950 at St. Richard's Hospital, Chichester, and thereafter by the Public Health Laboratory Service in Brighton and Portsmouth.

No. of samples procured and examined	..	958	
No. satisfying both the Methylene Blue and Phosphatase Tests	.. ..	896	
No. failing Phosphatase Test only	..	35	} 62
No. failing Methylene Blue Test only	..	26	
No. failing both Tests	.. ..	1	

Details.

	Past- eurised	Tuberculin Tested Pasteurised	Channel Is. Pasteurised	School Pasteurised
No. samples taken	463	113	145	237
No. satisfactory	435	101	139	221
No. failing Phos. Test	13	10	5	7
No. failing Meth. Blue	15	2	1	8
No. failing both Tests	—	—	—	1

In addition one sample of non-pasteurised milk, taken from the supply to a school, proved unsatisfactory.

Raw T.T. Samples.

Four samples were procured and examined. All proved satisfactory.

Bottle Rinses.

No. of samples procured and examined	..	..	..	466
No. satisfactory	..	..	..	390
No. fairly satisfactory	..	..	..	8
No. unsatisfactory	..	..	..	65
No. inconclusive results	..	..	..	3

The present standard of cleanliness is:—

Samples giving a colony count of less than 600 per pint bottle—	Satisfactory.
Samples giving a colony count of 600—2,000 per pint bottle—	Fairly satisfactory.
Samples giving a colony count of over 2,000 per pint bottle—	Unsatisfactory.

This standard did not come into use until the third quarter of the year. Previous to that a colony count of 100 or more per millilitre was counted unsatisfactory. Thus many of the samples reported "unsatisfactory" under the old standard would be considered "fairly satisfactory" under the new.

Water Sampling at Dairies.

29 samples were taken from dairies in the County. All proved satisfactory.

Inspections of Dairies by County Sanitary Officer.

The County Sanitary Officer carried out 489 inspections of dairies during the year.

Hospital and Institution Samples.

No. of Samples taken	..	..	..	..	18
No. unsatisfactory	..	..	..	..	nil

FOODS AND DRUGS ACT, 1938—TUBERCULOUS MILK

The number of samples submitted for biological examination for the presence of tubercle was controlled by the availability of guinea-pigs at the Laboratory.

No. of samples taken..	..	..	..	..	92
No. containing tubercle (unsatisfactory)	..	..	..	..	3
No. satisfactory	..	..	..	..	68
No. results outstanding at end of 1950	..	..	..	..	21

The seven results not available at the end of 1949 all proved satisfactory.

As stated above three samples submitted for biological examination during the year were found to contain tubercle bacilli. These results related to three herds, and, as a result of the veterinary investigations by the Divisional Veterinary Inspector of the Ministry of Agriculture & Fisheries, three animals were slaughtered.

RURAL WATER SUPPLIES AND SEWERAGE ACT, 1944.

PUBLIC HEALTH ACT, 1936—SECTION 307.

Schemes for the installation, extension and alteration of sewerage, sewage disposal and water supplies are submitted by Rural District Councils for the observations of the County Council, before being submitted to the Ministry of Health for approval for the purpose of a grant. The County Council is required to make a grant at least equal to that made by the Ministry of Health.

The following applications were submitted to the County Council during the year:—

District or Authority	Sewerage	Water
Chichester R.D. ..	Clymping Compton and West Marden	
Midhurst R.D. ..	West Lavington Rogate	Rogate (2nd stage)
North-West Sussex Joint Water Board		Ten mains extensions in various parts of the Board's Area.

SAMPLING OF WATER.

Total No. of samples procured on behalf of the North-West Sussex Joint Water Board during 1950	..	..	751
No. procured from Pumping Stations	..	..	586
No. satisfactory	..	..	576
No. fairly satisfactory (untreated)	..	..	2
No. suspicious (untreated)	..	..	1
No. unsatisfactory (untreated)	..	..	7
No. procured from distribution points (chlorinated)	..	..	32
No. satisfactory	..	..	32
No. procured from new mains before used for public supply	..	..	133
No. satisfactory	..	..	75
† No. unsatisfactory	..	..	58
No. procured from pumping stations for Chemical Analysis	..	..	12

† In some cases these unsatisfactory samples may be repeat samples taken from new mains previously tested and proving unsatisfactory.

HOUSING

The Table below shows that 1,421 new houses were erected in the County during 1950 as compared with 1,882 in 1949 and 1,660 in 1948. The figures have been obtained from the Medical Officers of Health of the County Districts.

Sanitary District	By Local Authority	By Private Enterprise	Total
Urban Districts:			
Arundel	—	—	—
Bognor Regis	43	34	77
Chichester	27*	11	38
Horsham	55	8	63
Littlehampton	34	7	41
Shoreham-by-Sea	60	12	72
Southwick	62†	15	77
Worthing	107	40	147
	388	127	515
Rural Districts:			
Chanctonbury	72	17	89
Chichester	225	50	275
Horsham	96	30	126
Midhurst	114	35	149
Petworth	64	7‡	71
Worthing	148	24	172
	743	163	906
Total	1,131	290	1,421

†Includes flats.

*Includes 12 houses built by County Council.

‡In addition, a Staff Block was added at St. Michael's School, Burton Park.

HOUSING SURVEY IN RURAL AREAS

The survey of housing conditions by Rural District Councils, started in 1944 on the instructions of the Ministry of Health, following the recommendations in the Hobhouse Report, has been completed, with the exception of 271 houses in the Petworth Rural District.

The classification of the houses at the time of inspection is shown in the Table below. It will be seen that 14.8% of the houses surveyed proved satisfactory in all respects; over 50% were in need of repair, structural alterations, or improvement, whilst 7.8% were considered to be unfit for habitation and beyond repair at reasonable expense.

The high cost of repairs and uneconomic rents were, no doubt, retarding factors in maintaining and improving existing property.

The figures in the table have been obtained from the Medical Officers of Health of the County Districts.

Rural District	Total number of houses included in survey	Number of houses surveyed and classified	(c) Classification of houses in (b)				
			Satisfactory in all respects	Minor defects	Requiring repair, structural alterations or improvements	Appropriate for reconditioning under Housing (Rural) Workers Acts	Unfit for habitation and beyond repair at reasonable expense
	(a)	(b)	(1)	(2)	(3)	(4)	(5)
Chanctonbury	4049	4049	996	1767	1098	40	148
Chichester	7784	7784	1138	1144	4176	333	993
Horsham	5477	5477	953	2285	1517	176	546
Midhurst	3371	3371	134	395	1736	769	337
Petworth	1461	1190	81	107	674	304	24
Worthing	7172	7172	1006	1169	4282	487	228
Totals	29314	29043	4308	6867	13483	2109	2276
Percentage		100	14.8	23.7	46.4	7.3	7.8

FOOD AND DRUGS ACT, 1938

LABELLING OF FOOD ORDER, 1946

PUBLIC HEALTH (Preservatives, Condensed and Dried Milk) REGULATIONS.

The following information, regarding samples procured for examination under the above legislation during the year 1950, has been supplied by the Chief Inspector of Weights and Measures.

	Milk	Other than Milk	Total
Submitted to the Public Analyst ..	66	307	373
Examined Departmentally	1,120	2	1,122
	1,186	309	1,495

Particulars of Samples analysed by the Public Analyst.

Description	Number Analysed	Genuine	Reported against
1. Liquid Milk and Cream	66	27	39
2. Processed Milk and Products derived from milk (including ice cream)	19	19	—
3. Edible Fats and Oils	11	11	—
4. Preserves	19	19	—
5. Tinned, Bottled and Dried articles	15	14	1
6. Alcoholic Beverages	10	10	—
7. Non-Alcoholic Beverages ..	28	26	2
8. Sugar and Flour Confectionery	15	15	—
9. Meat and Fish Products (not included in 5)	60	53	7
10. Vinegars, Pickles and Sauces ..	30	29	1
11. Spices, Flavourings and Essences	1	1	—
12. Cereal Products	7	7	—
13. Medicines, Drugs and Surgical Preparations	10	10	—
14. Miscellaneous	82	78	4
	373	319	54

Proceedings were instituted against the vendors of samples, as follows:—

Milk certified as containing added water.

2.9% ; 11.0% added water. Fined £4 and 5 gns. costs. Total
£9. 5s.

4.4% ; 5.7% added water. Fined £10 and 9 gns. costs. Total
£19. 9s.

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